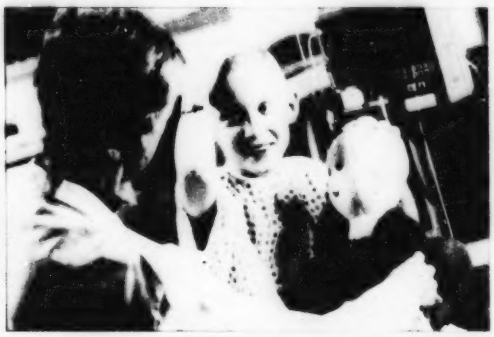
New Brunswick 1992-1996



New Brunswick

Health and Wellness

102-01266/

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I wish to acknowledge the contributions of the following teams who assisted in the preparation of this report:

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- Catherine O'Shea

Provincial Epidemiology Service:
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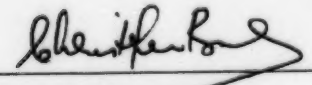
- Chris Heissner
- Deeba Zaidi

Communications New Brunswick:
- Randy Comeau

This is the first report on cancer in New Brunswick and covers the period from 1992-1996, and will serve as the baseline for future reports.

I hope you find the information useful and would welcome any comments or suggestions you may have for improvements.



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The Provincial Cancer Report

The Provincial Cancer Report contains four sections as follows:

Section I. Introduction
Section I introduces the report, offers a brief history on the Provincial Cancer Registry and illustrates the organizational structure of the Registry.

Section II. Provincial Overview
Section II gives a picture of cancer in New Brunswick in terms of overall incidence and mortality by age and gender, as well as age standardized rates, percent change and relative proportion of mortality.

Section III. Five Leading Cancers Among Males and Females
Section III identifies the 5 leading cancers among males and females as well as trends, in incidence and mortality for the 5 leading sites from 1992-1996.

Section IV. Cancer Morbidity and Mortality All Sites: 1992-1996.
Section IV is the most comprehensive section reporting on the number of new cancers registered each year, as well as the crude incidence rate and crude mortality rate for each cancer site over the 5 year period 1992-1996.

Section I. Introduction

The primary purpose of this report is to document the distribution of cancer in the New Brunswick population during the period 1992 – 1996.

It is also the purpose of this report to share with the reader the organization and structure of the New Brunswick Provincial Cancer Registry and to familiarize the reader with the process of registering a cancer patient, and associated tumor or tumors.

The core business of the New Brunswick Provincial Cancer Registry is to record all newly diagnosed malignancies, as well as selected benign (i.e. tumors of the central nervous system including the brain) cancers. The registry operates under the auspices of the Provincial Epidemiology Service of the Department of Health and Wellness.

The Registry registers all individuals diagnosed with cancer and their associated tumors. The registration is done through laboratory reports (pathology and cytology) sent from the eight provincial laboratories in New Brunswick, as well as death registrations sent from the provincial Vital Statistics Office.

The analysis of the data collected enables the Provincial Epidemiology Service to support cancer treatment, prevention planning, program evaluation and research activities, in addition to investigating concerns about cancer incidence at the community level. Data are also used at the national and international level.

Brief History

The New Brunswick Provincial Cancer Registry has maintained records on cancer patients in New Brunswick since 1952. The information contained in the registry consists of patient demographic records, separate tumor records for each tumor and a treatment record for each tumor. The system allows for a record of multiple tumors for one person.

The Registry was originally housed at and operated by the St. John General Hospital. The St. John General Hospital was the only hospital in New Brunswick which provided radiation oncology services until September, 1993, when a similar unit opened at the Georges L. Dumont Hospital in Moncton. The Registry was later moved to the new St. John Regional Hospital when it opened in July 1982. In April 1992, the day to day responsibilities were transferred to, and financed by, the Department of Health and Community Services. Since 1992, the Department in partnership with the Government of Canada has undertaken a program to upgrade and automate the Registry. Prior to 1988, all data were maintained on card files. A computerized registration system was introduced in 1989. Data from 1972 to the present are available in computerized format. Since 1989, data have been added directly on line.

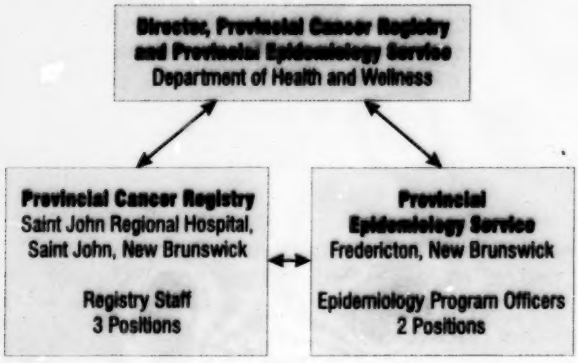
Since its inception, the Provincial Cancer Registry has forwarded data to Statistics Canada. Data have been forwarded on various media ranging from IBM punch cards (1954-1984), to magnetic tape (1985-1988), to diskette (1989-present).

Currently, there is no legislation in New Brunswick mandating the reporting of diagnosed cancer cases – data are collected on a voluntary basis. The authority for Region Hospital Corporations to provide the Cancer Registry with patient specific information is derived from Section 21(1), Regulations 92-84 of the *Hospital Services Act* of New Brunswick. Sources of data include: reports from pathology laboratories, radiation oncology centres, cytology and haematology laboratories, autopsy reports, death registrations, reports from other provincial cancer registries, and Statistics Canada.

Management and Organization

The New Brunswick Provincial Cancer Registry has a Director who is also the Director of the Provincial Epidemiology Service. The Registry employs three full time staff, who are responsible for all day-to-day activities of the Registry. The Epidemiology Program Officers at Central Office, in Fredericton, New Brunswick serve as liaison between the Registry and several internal and external parties, such as the Director, Statistics Canada, or the Region Hospital Corporations to name a few (see Fig. 1.1). All new notifications and associated reports flow through the St. John office. Data sharing with outside parties also occurs. This data tends to be information on individuals supplied to clinicians for treatment or patient care purposes. Summary reports on the population of cancer patients are also supplied to outside sources.

Fig. 1.1
Internal Organization of Provincial Cancer Registry



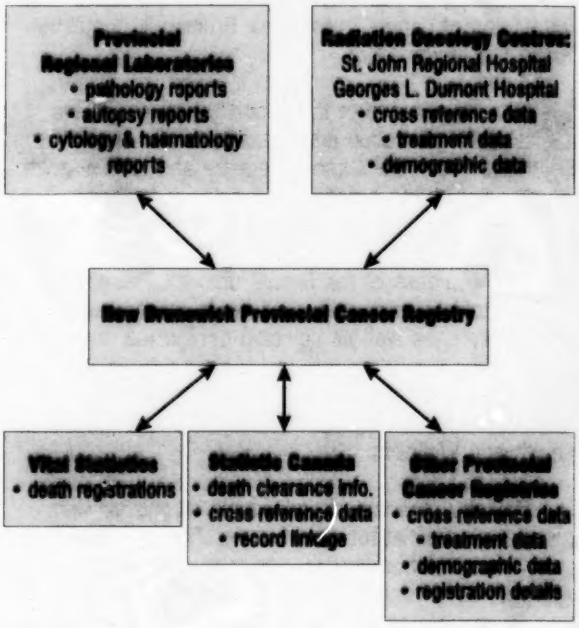
From Data to Information

Data are collected from a variety of sources as illustrated in Fig. 1.2. These multiple data sources present a unique set of issues surrounding data quality. Indeed, one of the primary roles of the Registry staff is to ensure data quality. Many of the activities of the registry staff are directed at addressing issue of data accuracy, completeness, and integrity.

Notification of a newly diagnosed tumor can be received in the Registry in a variety of ways. Primarily, reports or "consults" are sent from one of two Radiation Oncology Centres, from the provincial laboratories, and from Vital Statistics (see Fig. 1.2) to the Registry. In addition, information is sent from similar organizations in other provinces, and from the federal counterparts at Health Canada and Statistics Canada (e.g. Canadian Cancer Registry).

When a report is received, it is first checked for completeness and accuracy of the information. Incomplete or inaccurate reports are brought to the attention of the provincial regional laboratories for completion or correction. It is then checked against the database for an existing record on an individual. If a record exists, the new information is added. If a record does not exist, a new record is created.

Fig. 1.2
Collection of Cancer Registration Data In New Brunswick



The tumor with its associated information (e.g. topography, morphology, and staging) is coded and entered into the data base along with the appropriate demographic information. Treatment information, is also entered when it becomes available.

Information received from other jurisdictions, e.g. Statistics Canada, or other provincial registries, is processed and entered in a similar manner. As well, data are sent from the New Brunswick Registry to other jurisdictions. This data sharing primarily concerns residents of New Brunswick who are out of province at time of diagnosis or death and vice versa.

Data from the Provincial Cancer Registry are sent to the Canadian Cancer Registry at Statistics Canada, which publishes Canadian Cancer Statistics, in partnership with the National Cancer Institute of Canada, Health Canada, and all the provincial Cancer Registries.

Data are also disseminated upon specific request from other organizations, such as the Canadian Cancer Society, pharmaceutical companies, other provincial departments, governments, hospital corporations, and the general public. In all such requests, confidentiality is preserved as required.

Section II. Provincial Overview

Introduction

Over the five year period from 1992-1996 there were 16,194 New Brunswickers (9,012 males and 7,182 females) diagnosed with new malignancies. Thus, on average, there were 3,239 New Brunswickers per year with a newly diagnosed cancer during this 5 year period.

Cancer is the second leading cause of death in New Brunswick, after heart disease (see Fig. 2.1). Over the 5 year period from 1992-1996, 7,907 New Brunswickers died of cancer: 4,380 males and 3,527 females.

Table 2.1
Age Standardized (To 1994 Canadian Population) Incidence Rates Per 100,000 In New Brunswick By Sex: 1992-1996

Cancer Site	Male	Female
Oral	12.9	4.8
Stomach	15.0	7.5
Colorectal	60.0	49.4
Pancreas	10.1	10.1
Larnyx	8.7	1.6
Lung	91.7	43.9
Melanoma Skin	12.1	9.8
Breast	-	111.4*
Cervix	-	8.8*
Body of Uterus	-	18.2*
Ovary	-	13.5*
Prostate	130.9*	-
Testis	3.5*	-
Bladder	28.3	9.5
Kidney	16.2	10.7
Brain	7.1	6.4
Hodgkin's Lymphoma	2.7	2.2
Non-Hodgkin's Lymphoma	18.4	16.7
Multiple Myeloma	5.5	4.2
Leukemia	11.2	8.1
All Other	36.8	37.1
Total	**472.0**	**374.0**

* Sex Specific Population Used.

Incidence

Over the 5 year period, 1992-1996, there were on average 1,802 males per year newly diagnosed with cancer in New Brunswick. The highest number of newly diagnosed males, 1,903, occurred in 1994.

In the same 5 year period, there were on average 1,436 females per year newly diagnosed with cancer. The highest number of newly diagnosed females, 1,498 occurred in 1996.

The crude (unadjusted) incidence rate in New Brunswick from 1992-1996, for both genders combined, was 42.7/10,000. The crude rate for males was 48.0/10,000 and 37.6/10,000 for females.

Mortality

Over the five year period, 1992-1996, on average, 876 males died per year from cancer in New Brunswick. The highest number of deaths due to cancer among males, 938, occurred in 1995.

In the same five year period, there were on average, 705 female deaths due to cancer per year. The highest number of deaths due to cancer among females, 724, occurred in 1996.

Age and Cancer

There is a definite gradient in the relationship between cancer and age, with the vast majority of cases occurring in later years. Among males, 85.4% of newly diagnosed cases, and 89.5% of deaths occurred in those aged 55 and older (Fig. 2.2 and Fig. 2.3). Among females, 73.7% of newly diagnosed cases, and 85.5% of deaths occurred in those aged 55 and older (Fig. 2.4 and Fig 2.5).

Gender and Cancer

Over the 5 year period, 1992-1996, the total number of newly diagnosed tumours was greater in males (9,012) than in females (7,182), despite the greater number of sex specific sites in females. When sex specific sites in females (breast, cervix, ovary, and body of uterus) and males (testis and prostate) are excluded, the frequency of newly diagnosed cancers is still higher in males: 6,427 in males versus 3,565 in females.

Table 2.2 Age Standardized (To 1994 Canadian Population) Mortality Rates Per 100,000 In New Brunswick By Sex: 1992 - 1996

Cancer Site	Male	Female
Oral	4.1	1.2
Stomach	9.2	6.0
Colorectal	18.1	16.8
Pancreas	10.5	10.4
Larnyx	2.9	0.6
Lung	81.0	36.5
Melanoma Skin	2.2	1.6
Breast	-	34.1*
Cervix	-	2.3*
Body of Uterus	-	4.4*
Ovary	-	8.0*
Prostate	25.0*	-
Testis	0.2*	-
Bladder	6.0	3.2
Kidney	6.5	4.8
Brain	5.1	4.3
Hodgkin's Lymphoma	0.7	0.5
Non-Hodgkin's Lymphoma	8.4	7.3
Multiple Myeloma	4.2	2.6
Leukemia	6.1	4.6
All Other	36.9	31.4
Total	**227.0**	**181.0**

* Sex Specific Population Used.

With respect to mortality and gender, more males than females died of cancer over the 5 year period: 4,380 males versus 3,527 females. This is also true after gender specific sites are excluded: 3,875 males versus 2,579 females.

Incidence and Mortality Changes

Incidence and mortality changes varied according to gender and cancer sites between 1992 and 1996. For example, leukemia is down in both incidence and mortality among males but up in both among females. Figures 2.6 and 2.7 show the incidence and mortality rate changes by gender between 1992 and 1996.

Fig. 2.1

Cause Specific Mortality In New Brunswick by Major Category: 1992-1996

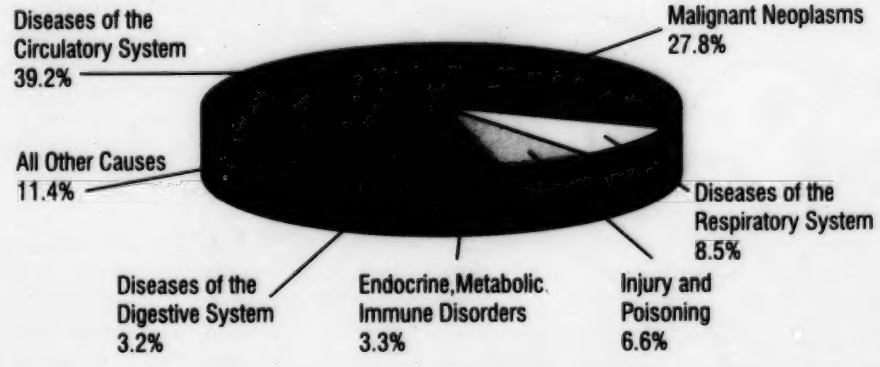

Diseases of the Circulatory System 39.2%
Malignant Neoplasms 27.8%
All Other Causes 11.4%
Diseases of the Respiratory System 8.5%
Diseases of the Digestive System 3.2%
Endocrine,Metabolic Immune Disorders 3.3%
Injury and Poisoning 6.6%

Fig. 2.2

Cancer Incidence Among Males in New Brunswick, by Year and Age Group, All Sites: 1992-1996

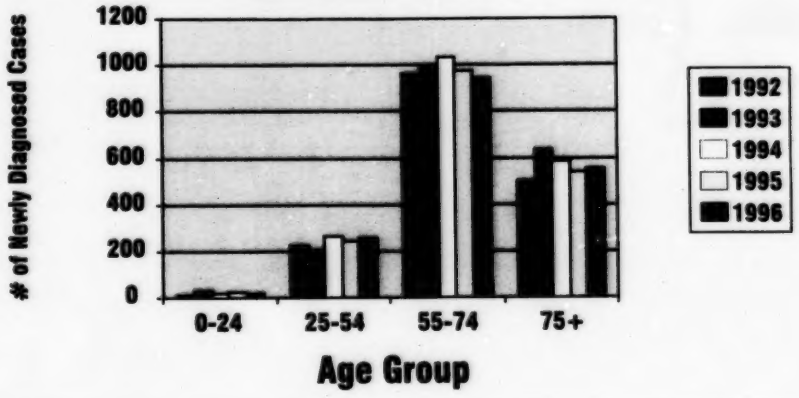


Fig. 2.3

Cancer Mortality Among Males in New Brunswick by Year and Age Group, All Sites: 1992-1996

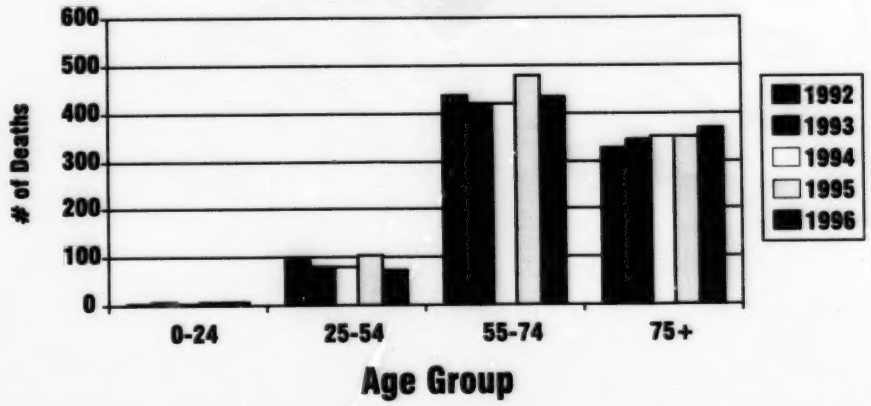


Fig. 2.4

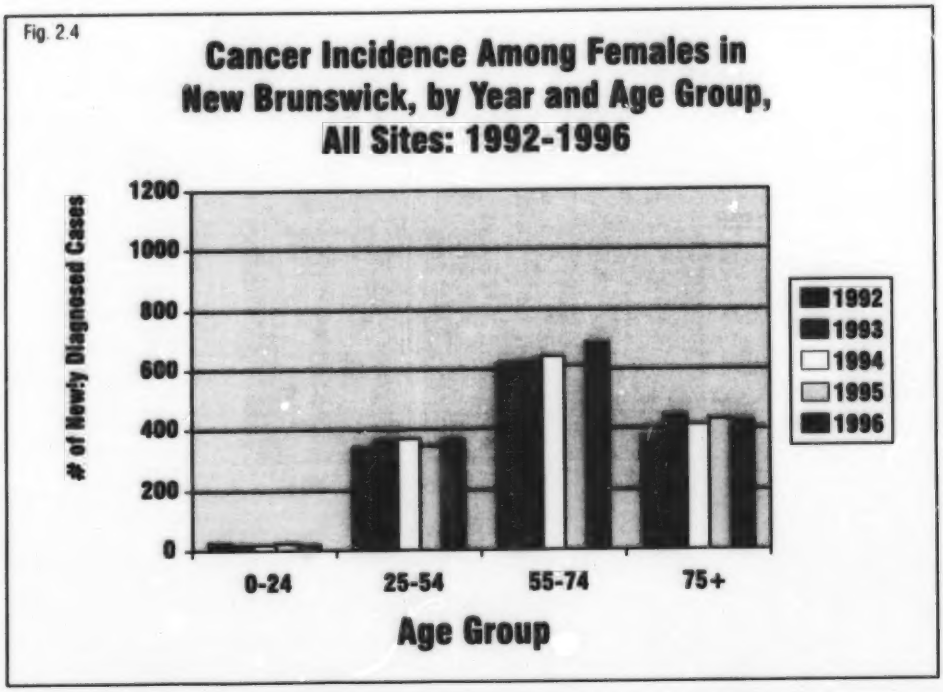

Cancer Incidence Among Females in New Brunswick, by Year and Age Group, All Sites: 1992-1996
# of Newly Diagnosed Cases
1200
1000
800
600
400
200
0
0-24
25-54
55-74
75+
Age Group
1992
1993
1994
1995
1996

Fig. 2.5

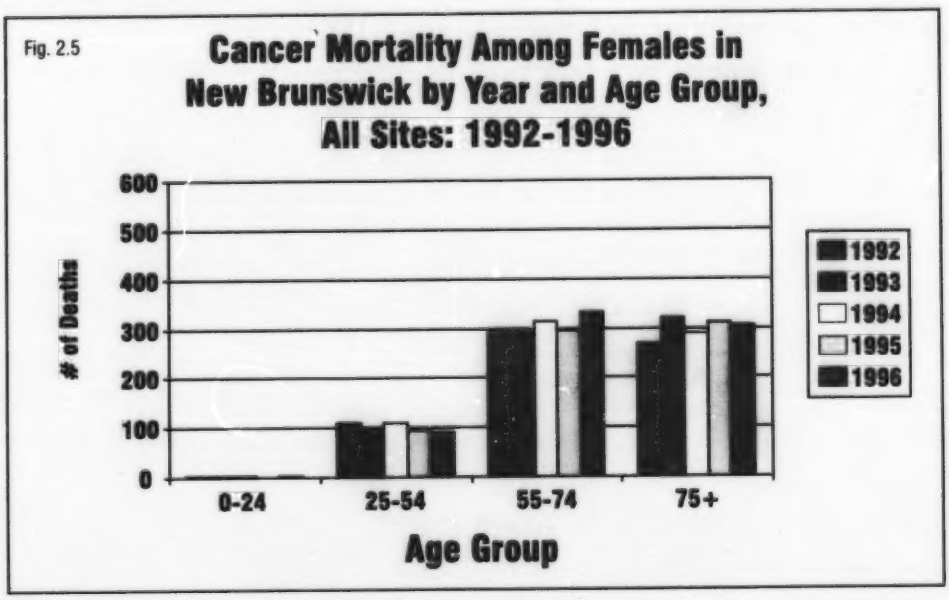

Cancer Mortality Among Females in New Brunswick by Year and Age Group, All Sites: 1992-1996
# of Deaths
600
500
400
300
200
100
0
0-24
25-54
55-74
75+
Age Group
1992
1993
1994
1995
1996

Fig. 2.6

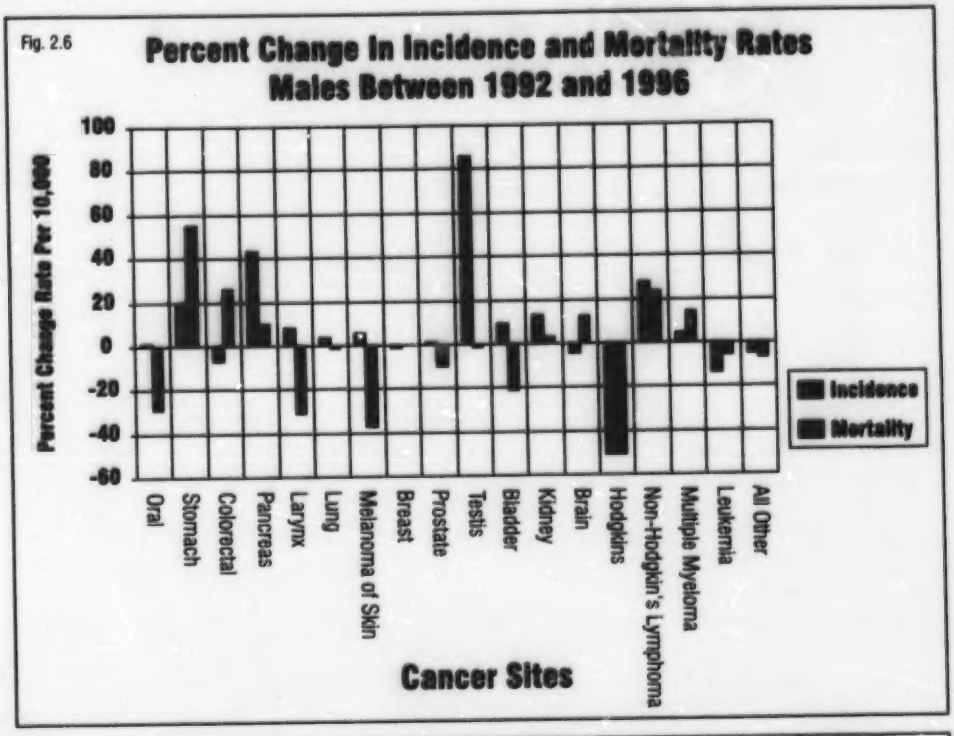
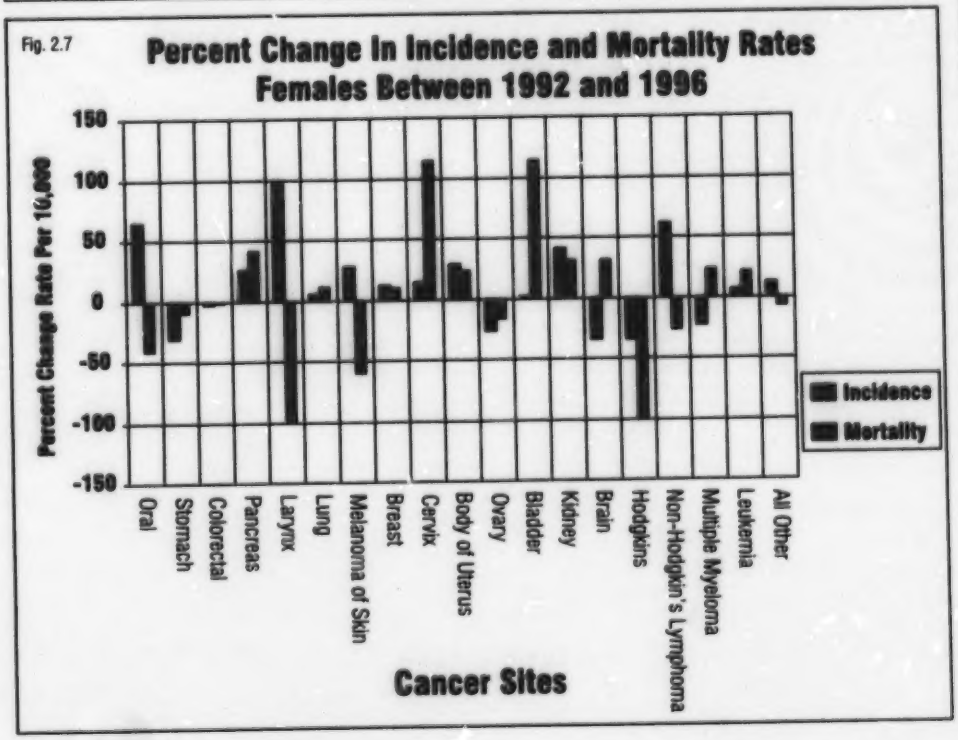

Percent Change in Incidence and Mortality Rates
Males Between 1992 and 1996
Percent Change Rate Per 10,000
100
80
60
40
20
0
-20
-40
-60
Oral
Stomach
Colorectal
Pancreas
Larynx
Lung
Melanoma of Skin
Breast
Prostate
Testis
Bladder
Kidney
Brain
Hodgkins
Non-Hodgkin's Lymphoma
Multiple Myeloma
Leukemia
All Other
Incidence
Mortality
Cancer Sites

Fig. 2.7


Percent Change in Incidence and Mortality Rates
Females Between 1992 and 1996
Percent Change Rate Per 10,000
150
100
50
0
-50
-100
-150
Oral
Stomach
Colorectal
Pancreas
Larynx
Lung
Melanoma of Skin
Breast
Cervix
Body of Uterus
Ovary
Bladder
Kidney
Brain
Hodgkins
Non-Hodgkin's Lymphoma
Multiple Myeloma
Leukemia
All Other
Incidence
Mortality
Cancer Sites

Section III
Top Five Cancers Among Males and Females

In both males and females, lung cancer accounted for a much greater proportion of mortality than newly diagnosed cases. Consider that in males, lung cancer accounted for 19% of all newly diagnosed cases, but 35% of all deaths due to cancer. This is due to its poor survival rate and reflects its relative impact on the population in terms of potential years of life lost.

A similar effect is seen among females, with lung cancer accounting for 12% of newly diagnosed cancers, putting it in third place behind breast and colorectal cancer. However, lung cancer accounts for 20% of cancer deaths, among females putting it in first place, in terms of mortality.

A similar finding is seen among males, with the 4th and 5th most common cancers in terms of incidence, bladder, and non-Hodgkin's lymphoma are displaced by pancreas and stomach in terms of mortality.

Among females, body of uterus and non-Hodgkin's are 4th and 5th in terms of incidence, but are displaced by pancreas and ovary in terms of mortality.

Fig. 3.1

Percent Distribution Incidence of 5 Leading Cancers Among Males: 1992-1996

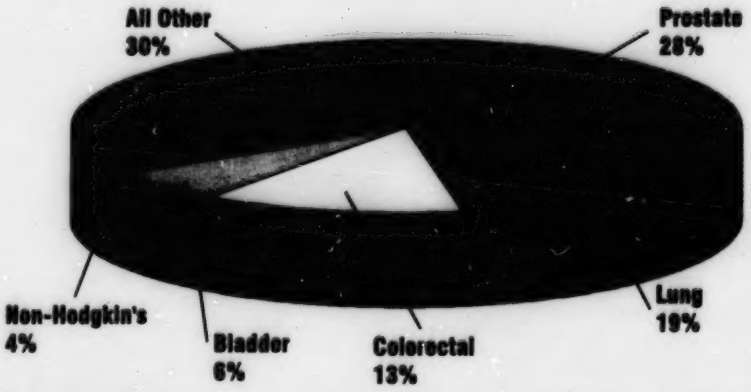


Fig. 3.2

Percent Distribution Incidence of 5 Leading Cancers Among Females 1992-1996

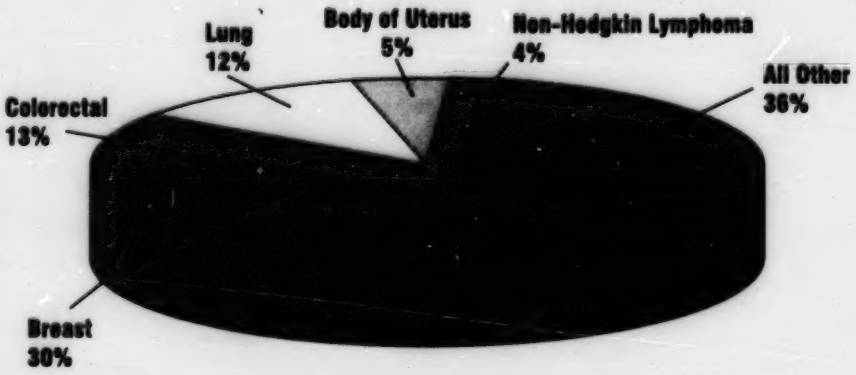


Fig. 3.3

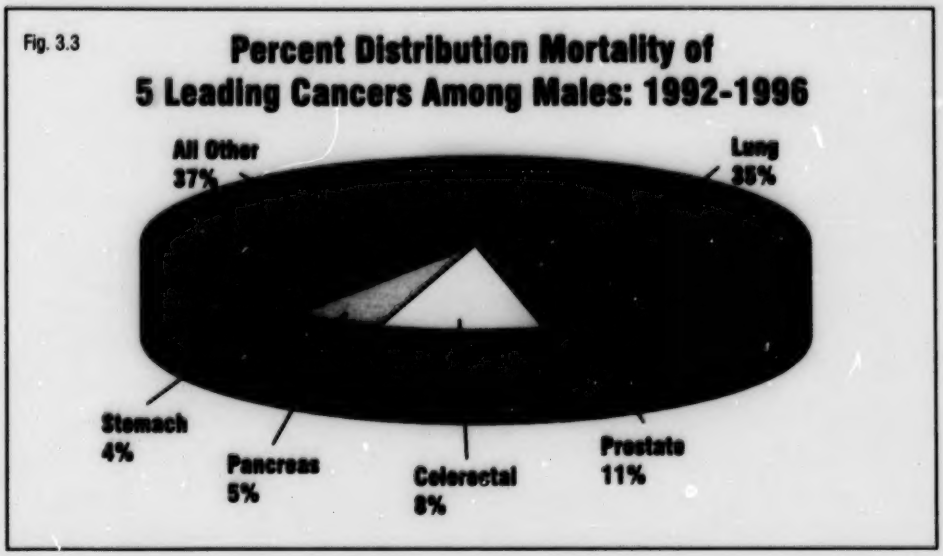

Percent Distribution Mortality of
5 Leading Cancers Among Males: 1992-1996
All Other
37%
Lung
35%
Stomach
4%
Pancreas
5%
Colorectal
8%
Prostate
11%

Fig. 3.4

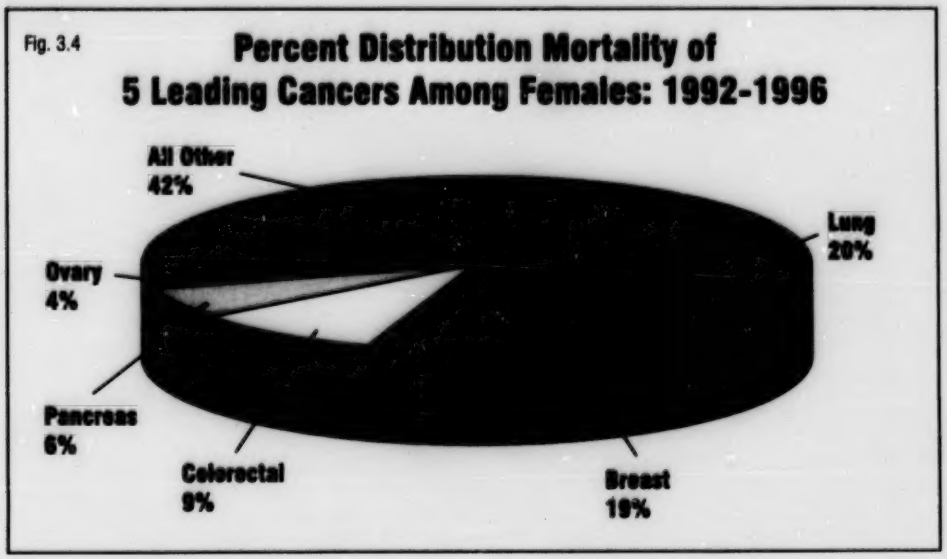

Percent Distribution Mortality of
5 Leading Cancers Among Females: 1992-1996
All Other
42%
Lung
20%
Ovary
4%
Pancreas
6%
Colorectal
9%
Breast
19%

Fig. 3.5

Incidence Rate 5 Leading Cancers Among Males: 1992-1996

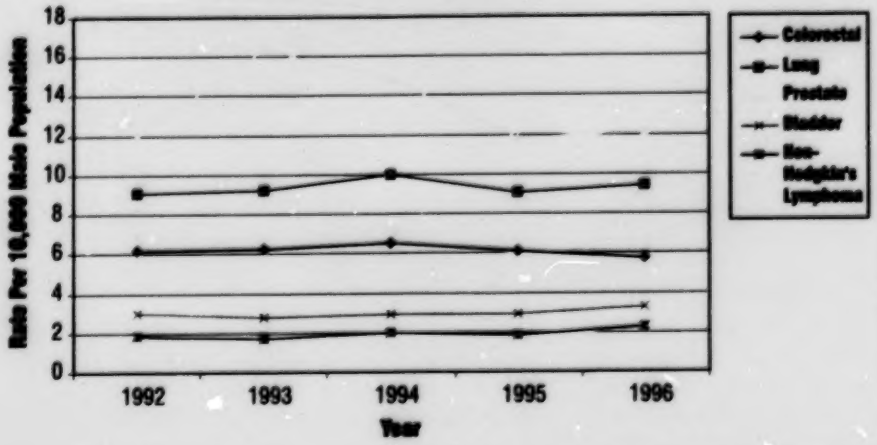


Fig. 3.6

Incidence Rate 5 Leading Cancers Among Females: 1992 - 1996

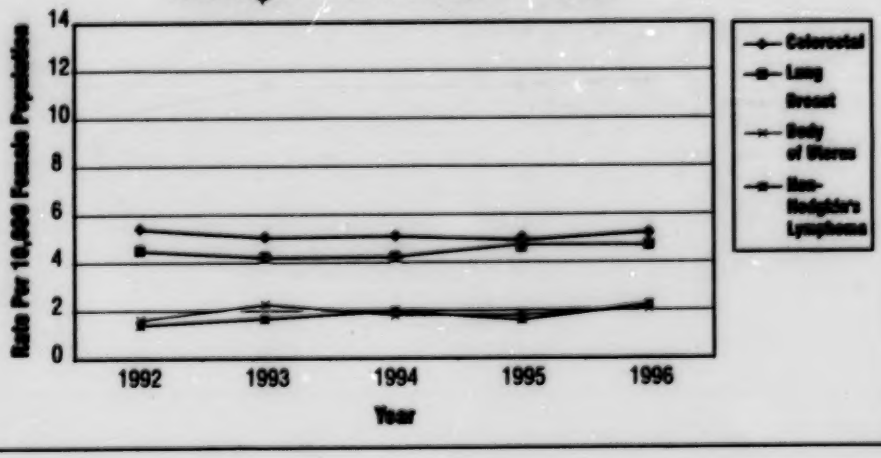


Fig. 3.7

Mortality Rate 5 Leading Cancers Males: 1992-1996

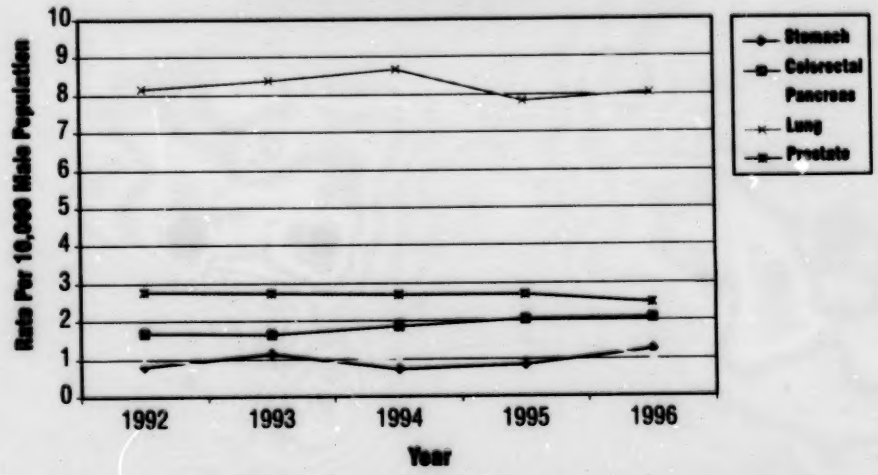
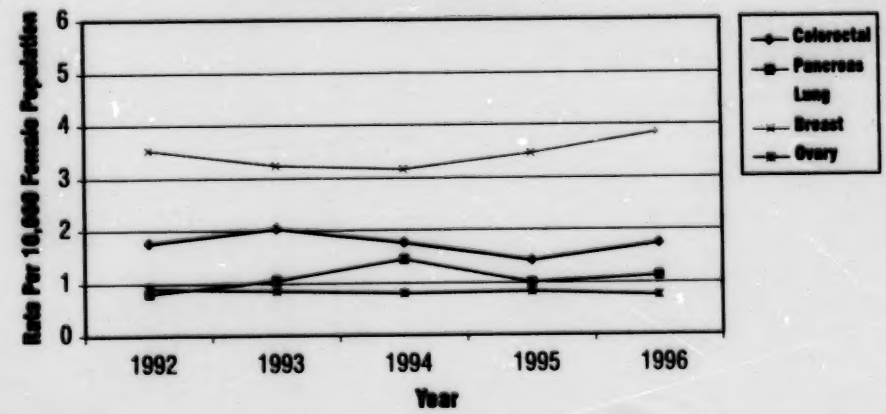


Fig. 3.8

Mortality Rate 5 Leading Cancers Among Females: 1992-1996



Males - Five Year Total New Registrations By Site Ranked in Descending Order: 1992-1996

Site	5 Yr. Total	% of Total
1. Prostate	2521	28.0
2. Lung	1745	19.4
3. Colorectal	1143	12.7
4. Bladder	543	6.0
5. Non-Hodgkin's Lymphoma	347	3.9
6. Kidney	305	3.4
7. Stomach	290	3.2
8. Oral	241	2.7
9. Melanoma of Skin	227	2.5
10. Leukemia	215	2.4
11. Pancreas	195	2.2
12. Larynx	163	1.8
13. Brain	134	1.5
14. Multiple Myeloma	104	1.2
15. Testis	64	0.7
16. Hodgkin's Lymphoma	50	0.6
17. Breast	20	0.2
All Other	705	7.8
TOTAL	**9,012**	**100.0**

Males - Five Year Total Deaths By Site Ranked in Descending Order: 1992-1996

Site	5 Year Total	% of Total
1. Lung	1546	35.3
2. Prostate	502	11.5
3. Colorectal	350	8.0
4. Pancreas	203	4.6
5. Stomach	179	4.1
6. Non-Hodgkin's Lymphoma	162	3.7
7. Kidney	124	2.8
8. Bladder	119	2.7
9. Leukemia	118	2.7
10. Brain	96	2.2
11. Multiple Myeloma	79	1.8
12. Oral	77	1.8
13. Larynx	54	1.2
14. Melanoma of Skin	42	1.0
15. Hodgkin's Lymphoma	14	0.3
16. Testis	3	0.1
17. Breast	0	0.0
All Other	712	16.3
TOTAL	**4,380**	**100.0**

Females - Five Year Total New Registrations By Site Ranked in Descending Order: 1992-1996

Site	Total	% of Total
1. Breast	2126	29.6
2. Colorectal	963	13.4
3. Lung	838	11.7
4. Body of Uterus	347	4.8
5. Non-Hodgkin's Lymphoma	321	4.5
6. Ovary	258	3.6
7. Kidney	205	2.9
8. Pancreas	200	2.8
9. Melanoma of Skin	185	2.6
10. Bladder	184	2.6
11. Cervix	167	2.3
12. Leukemia	157	2.2
13. Stomach	146	2.0
14. Brain	121	1.7
15. Oral	93	1.3
16. Multiple Myeloma	80	1.1
17. Hodgkin's Lymphoma	41	0.6
18. Larynx	31	0.4
All Other	719	10.0
Total	**7,182**	**100.0**

Females - Five Year Total Deaths By Site Ranked in Descending Order: 1992-1996

Site	5 Year Total	% of Total
1 Lung	704	20.0
2 Breast	660	18.7
3 Colorectal	332	9.4
4 Pancreas	206	5.8
5 Ovary	156	4.4
6 Non-Hodgkin's Lymphoma	143	4.1
7 Stomach	119	3.4
8 Kidney	93	2.6
9 Leukemia	92	2.6
10 Body of Uterus	87	2.5
11 Brain	83	2.4
12 Bladder	63	1.8
13 Multiple Myeloma	51	1.4
14 Cervix	45	1.3
15 Melanoma of Skin	31	0.9
16 Oral	23	0.7
17 Larynx	12	0.3
18 Hodgkin's Lymphoma	9	0.3
All Other	618	17.5
TOTAL	**3,527**	**100.0**

Section IV: Cancer Incidence and Mortality All Sites 1992-1996

In this section, individual cancer sites, 17 sites for males and 18 sites for females are reported on. The sites identified here account for 90% of all cancers registered among males and females between 1992 and 1996. The remaining 10% are grouped under the category "All Other".

Each cancer site is given a ranking in terms of both its incidence and mortality. The category "All Other" is left out of the rankings of incidence and mortality. However, on the pages that discuss the "All Other" grouping at the end of this section, an indication of its ranking, if it had been included, is given. The incidence and mortality rates are crude rates (not age standardized).

Tumour registrations are included in a site as defined by the **International Classification of Disease for Oncology (ICD-O) 2nd Edition**, and where possible, the topographical classification numbers are given. For Leukemia and the Lymphomas their morphological numbers are indicated, since leukemia and lymphomas are not site specific and may occur in diffuse or multiple locations in the body.

For each site, the actual number of registrations, the incidence rate and the mortality rate are shown graphically. Rates are reported as the number of cases per **10,000** population by gender. As well, the percentage, frequency, rank, and range are indicated in the text section for each site.

Oral Cancer Males

Introduction

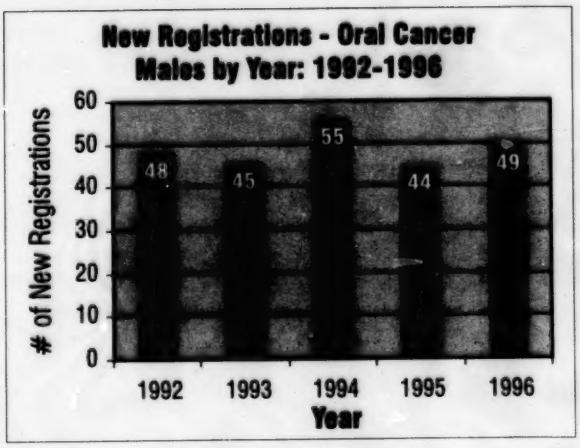
The category oral cancer includes ICDO-2 topographic classification numbers C00 to C14. These include: the oral cavity and pharynx, tongue, gums, floor of mouth, palate, parotid gland, salivary glands, tonsil, oropharynx, nasopharynx, pyriform sinus, hypopharynx, and, all other and ill-defined sites of the oral cavity.

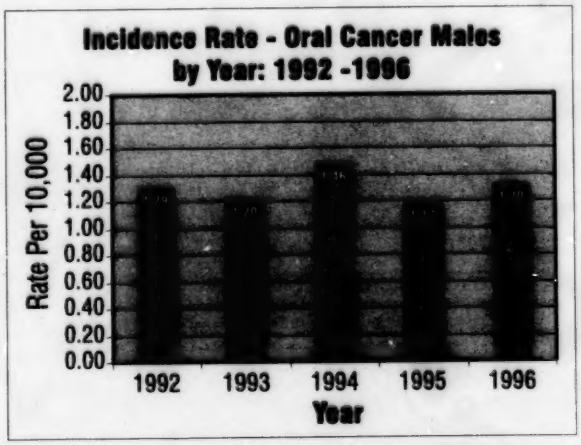
Incidence

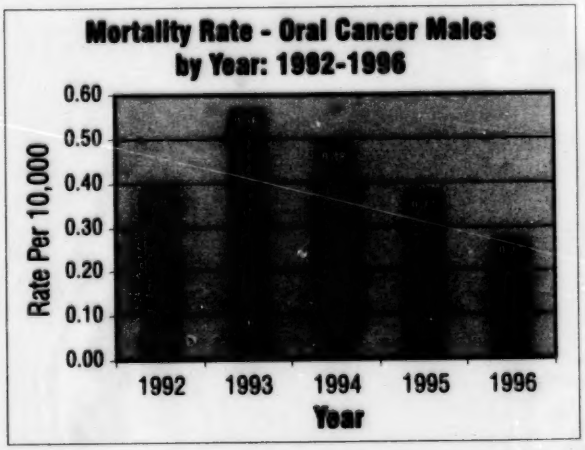
Oral cancer represented 2.7% of all newly registered cancers among males over the period 1992 - 1996. Out of the 17 cancer sites reported here for males, oral cancer incidence ranked 8th overall with 241 new registrations between 1992-1996. The incidence rate per 10,000 male population ranged from 1.17 to 1.46 for the same period.

Mortality

There were 77 deaths due to oral cancer among males registered between 1992 - 1996, representing 1.8% of all cancer deaths among males in this period. The mortality rate ranged from 0.27/10,000 to 0.56/10,000 during this time, with the highest rate occurring in 1993. The 5 year average mortality rate was 0.41/10,000 and ranked 12th out of the 17 cancer sites reported for males.







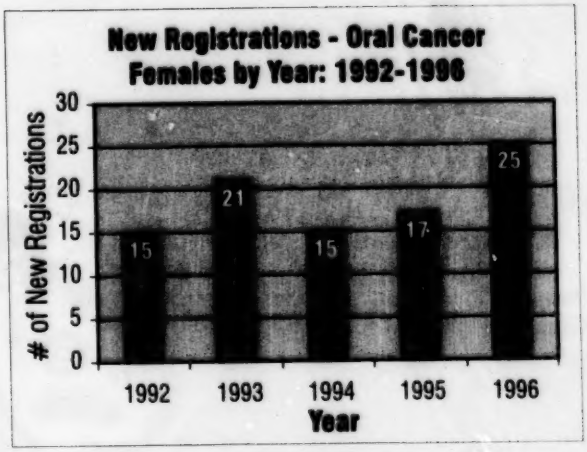
Oral Cancer Females

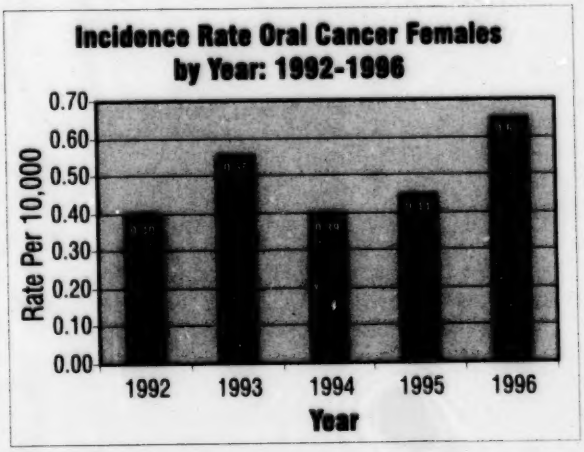
Incidence

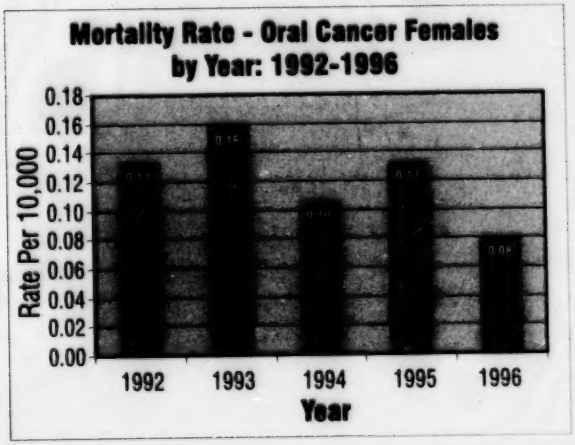
Oral cancer represented 1.3% of all newly registered cancers for females over the period 1992-1996. Out of the 18 cancer sites reported here for females, oral cancer incidence ranked 15th overall, with 93 new registrations between 1992-1996. The incidence rate ranged from 0.39/10,000 to 0.65/10,000 for the same period.

Mortality

There were 23 deaths registered among females due to oral cancer between 1992-1996, representing 0.7% of all cancer deaths among females for this period. The mortality rate ranged from 0.08/10,000 to 0.16/10,000 during this time, with the highest rate occurring in 1993. The 5 year average mortality rate was 0.12/10,000, and ranked 16th out of the 18 cancer sites reported for females.







Stomach Cancer Males

Introduction

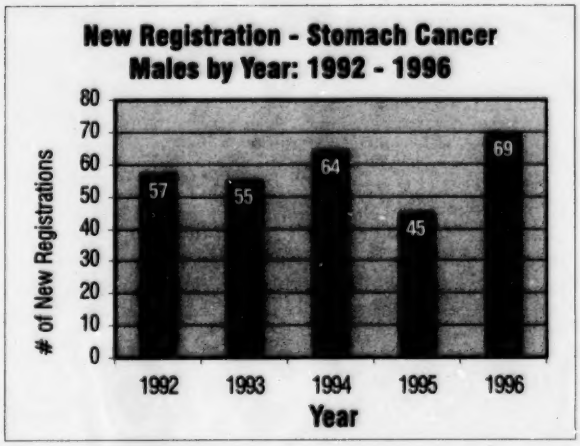
The category stomach cancer includes ICDO-2 topographic classification numbers 16.0 to 16.9 These include: cardia – not otherwise specified, fundus and body of stomach, gastric antrum, pylorus, lesser and greater curvature of stomach – not otherwise specified, overlapping lesion of stomach, and stomach – not otherwise specified.

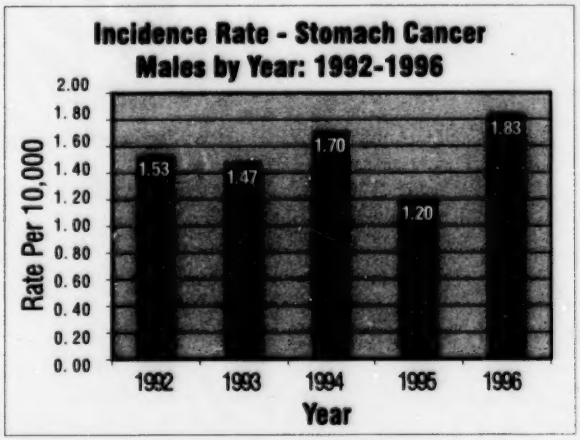
Incidence

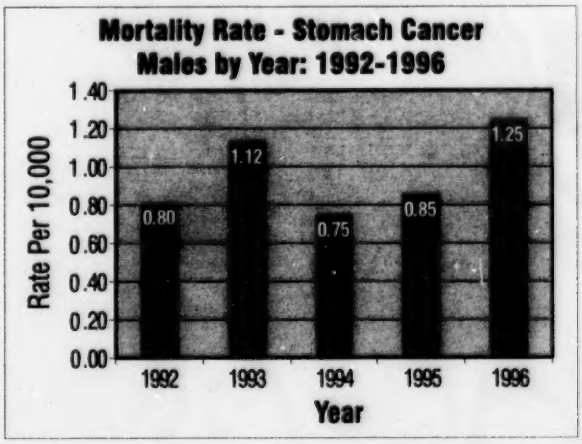
Stomach cancer represented 3.2% of all newly registered cancers among males over the period 1992 - 1996. Out of the 17 cancer sites reported here for males, stomach cancer incidence ranked 7th overall with 290 new registrations between 1992-1996. The incidence rate ranged from 1.20/10,000 to 1.83/10,000 for the same period.

Mortality

There were 179 deaths due to stomach cancer among males registered between 1992-1996, representing 4.1% of all cancer deaths among males in this period. The mortality rate ranged from 0.75/10,000 to 1.25/ 10,000 during this time, with the highest rate occurring in 1996. The 5 year average mortality rate was 0.95/ 10,000 and ranked 5th out of the 17 cancer sites reported for males.







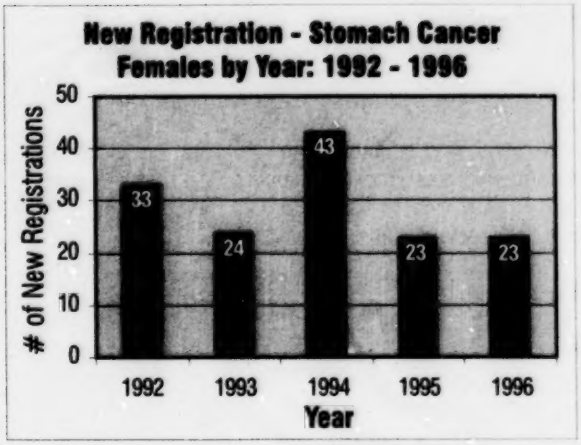
Stomach Cancer Females

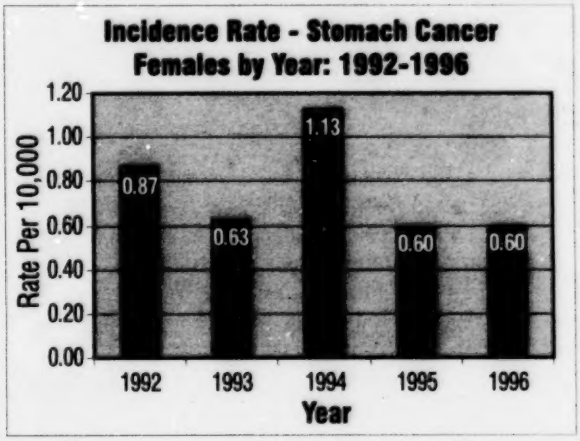
Incidence

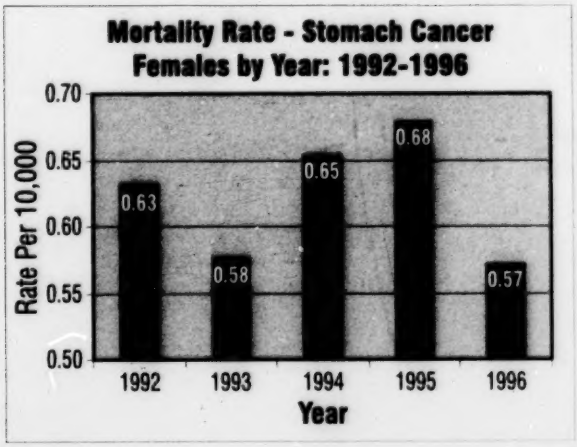
Stomach cancers represented 2.0% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, stomach cancer incidence ranked 13th overall, with 146 new registrations between 1992-1996. The incidence rate ranged from 0.60/10,000 to 1.13/10,000 for the same period.

Mortality

There were 119 deaths due to stomach cancer among females registered between 1992-1996, representing 3.4% of all cancer deaths among females in this period. The mortality rate ranged from 0.57/10,000 to 0.68/10,000 during this time, with the highest rate occurring in 1995. The 5 year average mortality rate was 0.62/10,000, and ranked 7th out of the 18 cancer sites reported for females.







Colorectal Cancer Males

Introduction

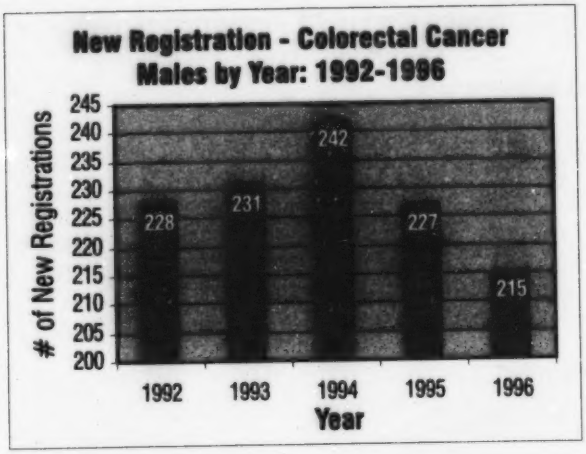
The category colorectal cancer includes the ICDO-2 topographic classification numbers C18 to C21. These include: the small intestine, colon, rectosigmoid junction, rectum, anus and anal canal.

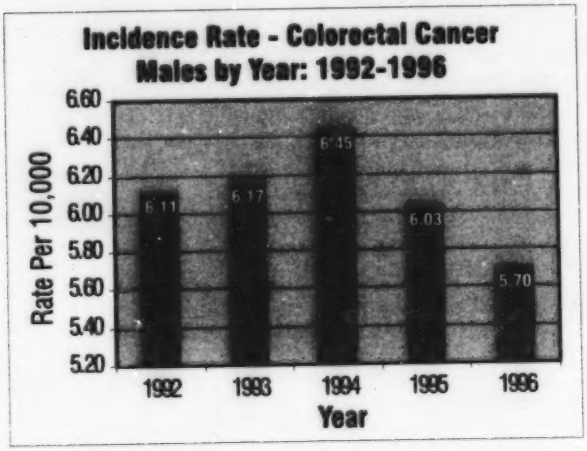
Incidence

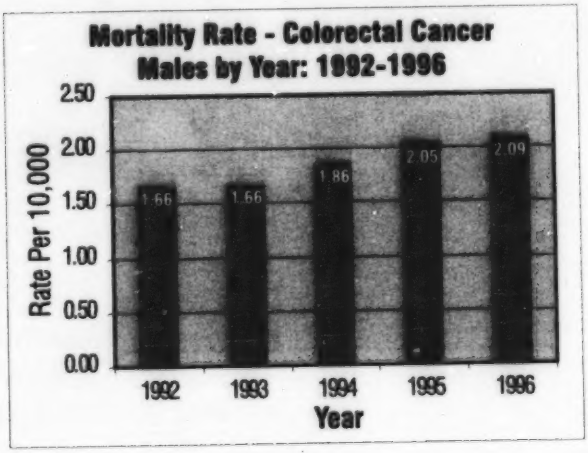
Colorectal cancer represented 12.7% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, colorectal cancer incidence ranked 3rd overall with 1,143 new registrations between 1992-1996. The incidence rate ranged from 5.70/10,000 to 6.45/10,000 for the same period.

Mortality

There were 350 deaths due to colorectal cancer among males registered between 1992-1996, representing 8.0% of all cancer deaths among males in this period. The mortality rate ranged from 1.66/10,000 to 2.09/10,000 during this time, with the highest rate occurring in 1996. The 5 year average mortality rate was 1.86/10,000 and ranked 3rd out of the 17 cancer sites reported for males.







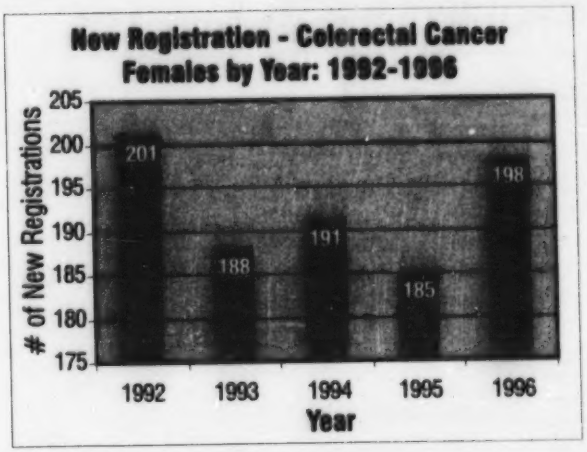
Colorectal Cancer Females

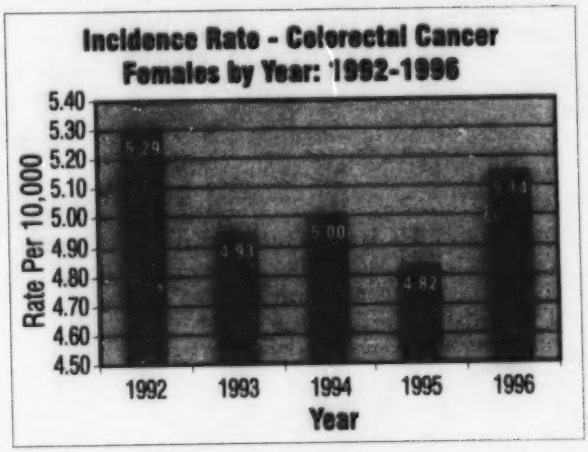
Incidence

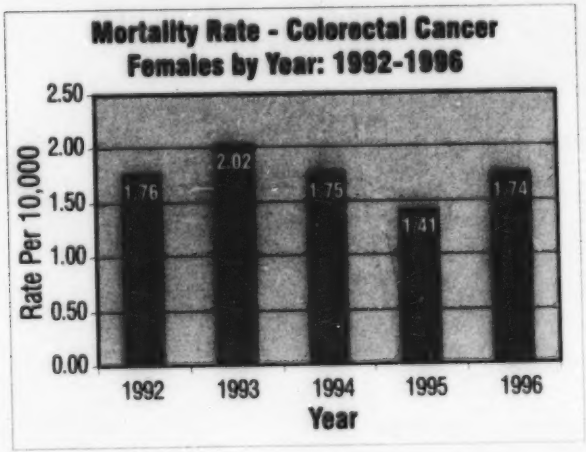
Colorectal cancer represented 13.4% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, colorectal cancer incidence ranked 2nd overall, with 963 new registrations between 1992-1996. The incidence rate ranged from 4.82/10,000 to 5.29/10,000 for the same period.

Mortality

There were 332 deaths due to colorectal cancer among females registered between 1992-1996, representing 9.4% of all cancer deaths among females in this period. The mortality rate ranged from 1.41/10,000 to 2.02/10,000 during this time, with the highest rate occurring in 1993. The 5 year average mortality rate was 1.74/10,000, and ranked 3rd out of the 18 cancer sites reported for females.







Pancreas Cancer Males

Introduction

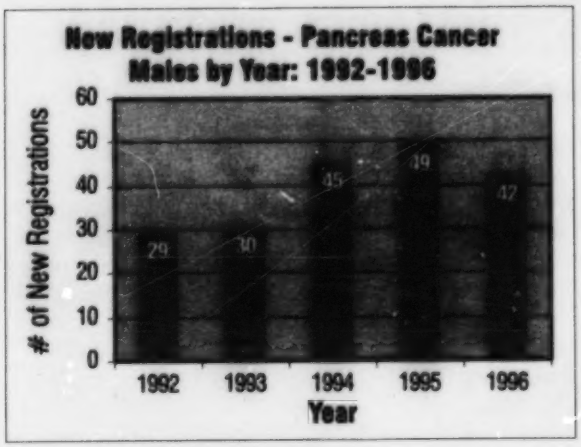
The category pancreas cancer includes the ICDO-2 topographic classification number C25 (C25.0 to C25.9) These include: head, body and tail of pancreas, pancreatic duct, islets of langerhans, other specified parts of pancreas, overlapping lesions of pancreas and pancreas – not otherwise specified.

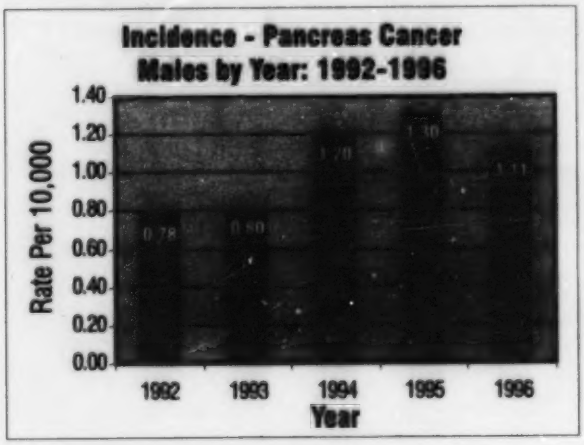
Incidence

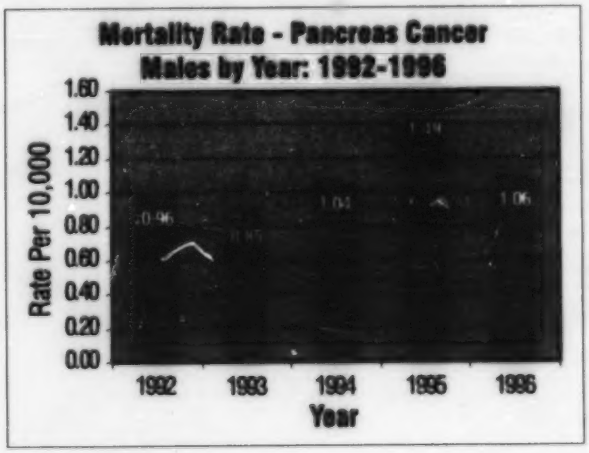
Pancreas cancer represented 2.2% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, pancreas cancer incidence ranked 11th overall with 195 new registrations between 1992-1996. The incidence rate ranged from 0.78/10,000 to 1.30/10,000 for the same period.

Mortality

There were 203 deaths due to pancreas cancer among males registered between 1992-1996, representing 4.6% of all cancer deaths among males in this period. The mortality rate ranged from 085/10,000 to 1.49/10,000 during this time, with the highest rate occurring in 1995. The 5 year average mortality rate was 1.08/10,000 and ranked 4th out of the 17 cancer sites reported for males.







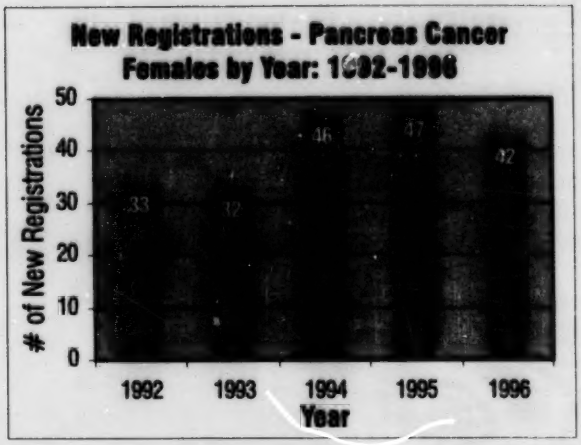
Pancreas Cancer Females

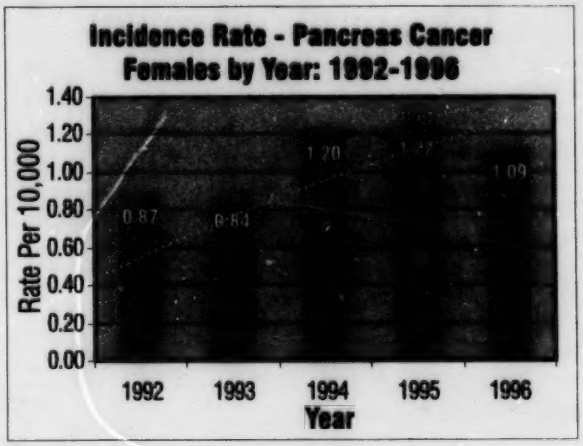
Incidence

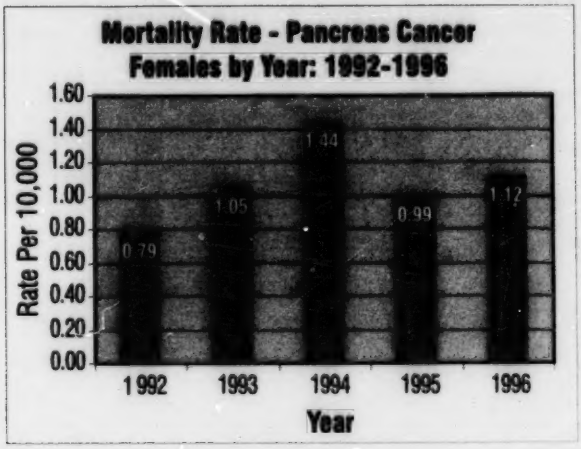
Pancreas cancer represented 2.8% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, pancreas cancer incidence ranked 8th overall, with 200 new registrations between 1992-1996. The incidence rate ranged from 0.84/10,000 to 1.22/10,000 for the same period.

Mortality

There were 206 deaths due to pancreas cancer among females registered between 1992-1996, representing 5.8% of all cancer deaths among females in this period. The mortality rate ranged from 0.79/10,000 to 1.44/10,000 during this time, with the highest rate occurring in 1994. The 5 year average mortality rate was 1.08/10,000 and ranked 4th out of the 18 cancer sites reported for females.







Larynx Cancer Male

Introduction

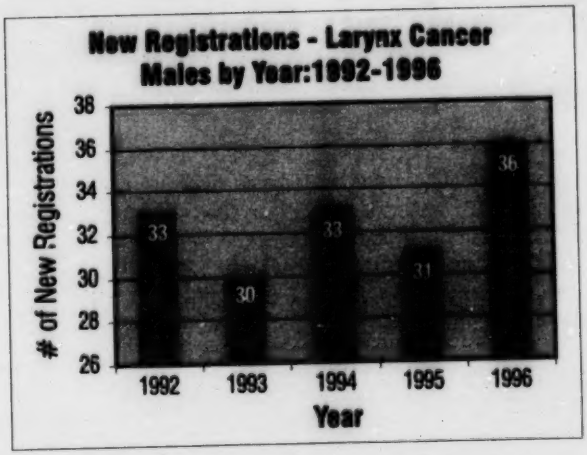
The category larynx cancer includes the ICDO-2 topographic classification number C32 (C32.0 to C32.9). These include the glottis, supraglottis, subglottis, laryngeal cartilage, overlapping lesion of larynx, and larynx – not otherwise specified.

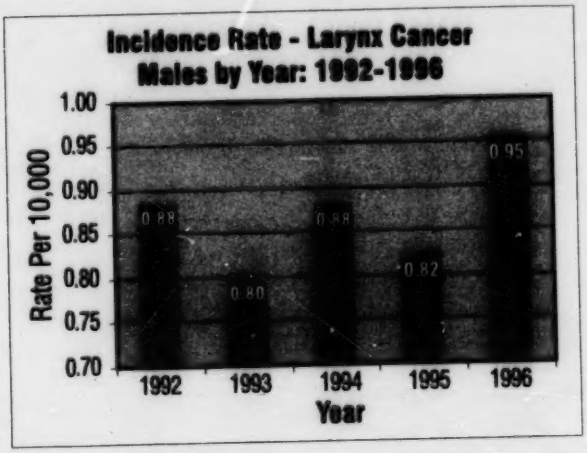
Incidence

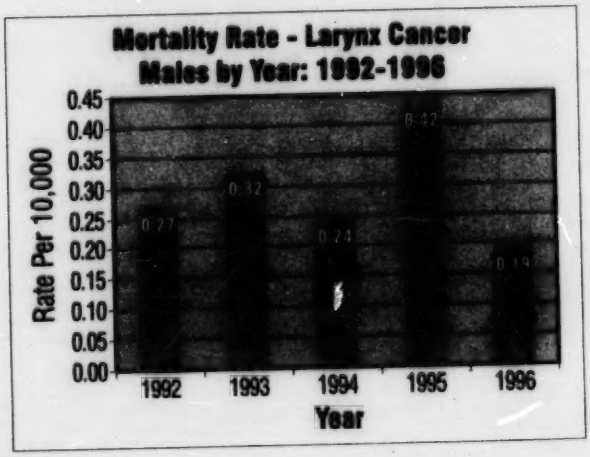
Cancer of the larynx represented 1.8% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, larynx cancer incidence ranked 12th overall, with 163 new registrations between 1992-1996. The incidence rate ranged from 0.80/10,000 to 0.95/10,000 for the same period.

Mortality

There were 54 deaths due to larynx cancer among males registered between 1992-1996, representing 1.2% of all cancer deaths among males in this period. The mortality rate ranged from 0.19/10,000 to 0.42/10,000 during this time, with the highest rate occurring in 1995. The 5 year average mortality rate was 0.29/10,000 and ranked 13th out of the 17 cancer sites reported for males.







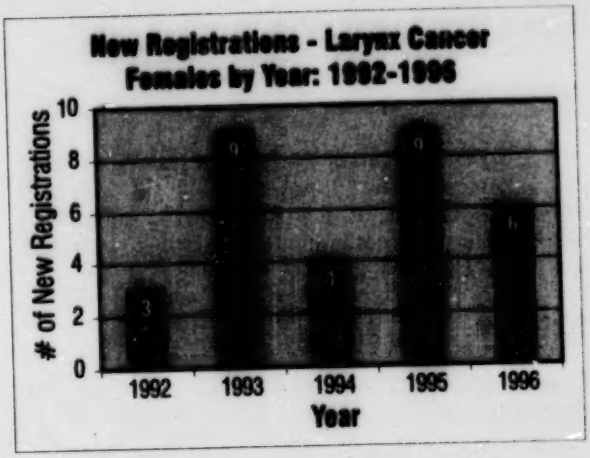
Larynx Cancer Females

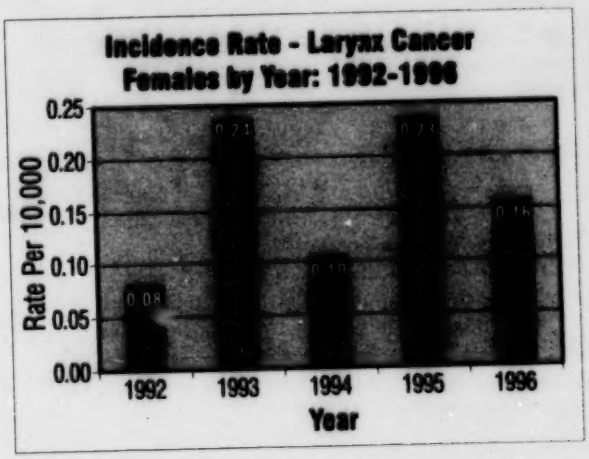
Incidence

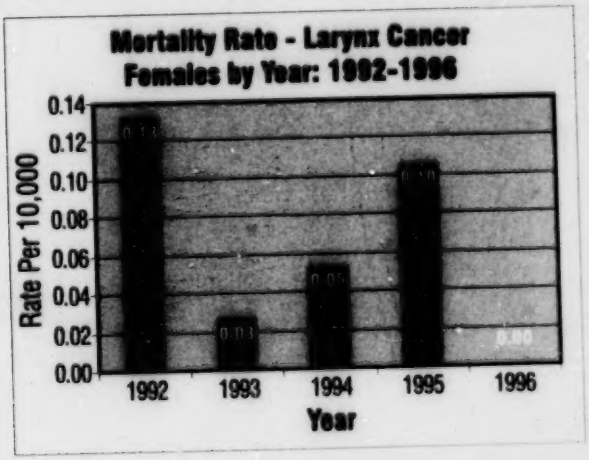
Cancer of larynx represented 0.4% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, larynx cancer incidence ranked 18th overall, with 31 new registrations between 1992-1996. The incidence rate ranged from 0.08/10,000 to 0.24/10,000 for the same period.

Mortality

There were 12 deaths due to cancer of the larynx among females registered between 1992-1996, representing 0.3% of all cancer deaths among females in this period. The mortality rate ranged from 0.00/10,000 to 0.13/10,000 during this time, with the highest rate occurring in 1992. The 5 year average mortality rate was 0.06/10,000 and ranked 17th out of the 18 cancer sites reported for females.







Lung Cancer Males

Introduction

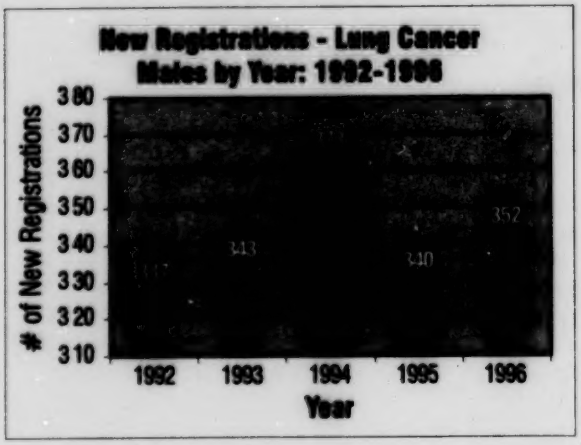
The category lung cancer includes the ICDO-2 topographic classification number C33 to C34. These include: the trachea, main bronchus, upper, middle, and lower lobe of lung, overlapping lesion of lung and lung – not otherwise specified.

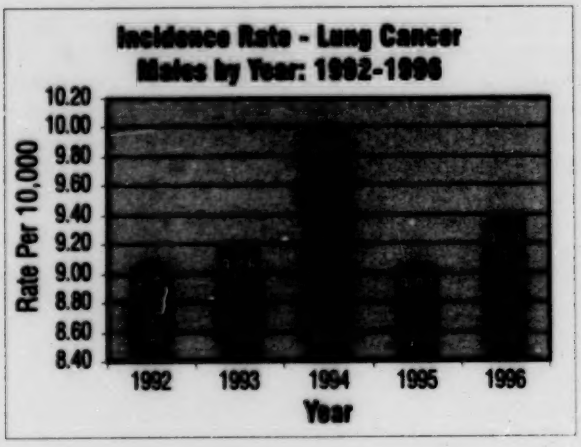
Incidence

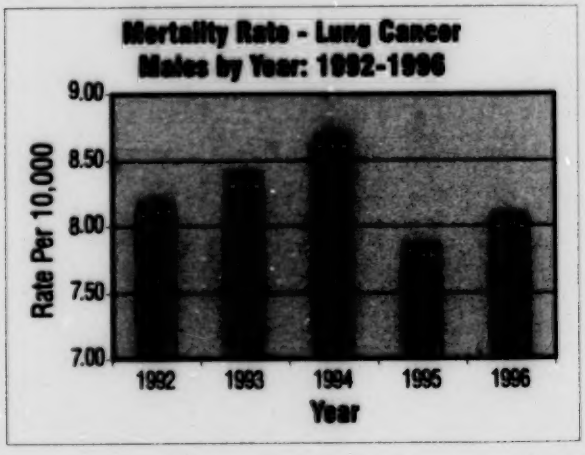
Lung cancer represented 19.40% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, lung cancer incidence ranked 2nd overall with 1,745 new registrations between 1992-1996. The incidence rate ranged from 9.03/10,000 to 9.93/10,000 for the same period.

Mortality

There were 1,546 deaths due to lung cancer among males registered between 1992-1996, representing 35.3% of all cancer deaths among males in this period. The mortality rate ranged from 7.86/10,000 to 8.68/ 10,000 during this time, with the highest rate occurring in 1994. The 5 year average mortality rate was 8.23/ 10,000 and ranked 1st out of the 17 cancer sites reported for males.







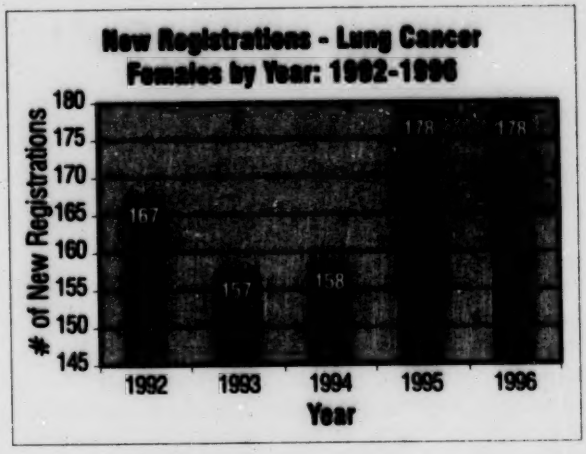
Lung Cancer Females

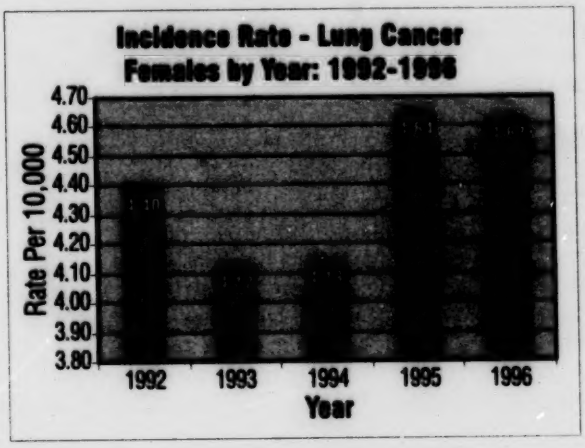
Incidence

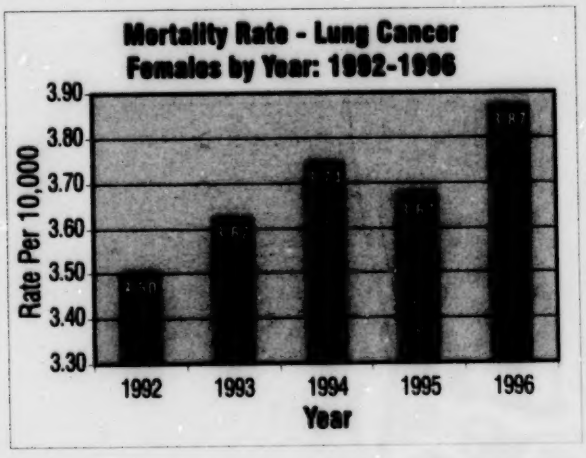
Lung cancer represented 11.7% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, lung cancer incidence ranked 3rd overall, with 838 new registrations between 1992-1996. The incidence rate ranged from 4.12/10,000 to 4.64/10,000 for the same period.

Mortality

There were 704 deaths due to lung cancer among females registered between 1992-1996, representing 20.0% of all cancer deaths among females in this period. The mortality rate ranged from 3.50/10,000 to 3.87/10,000 during this time, with the highest rate occurring in 1996. The 5 year average mortality rate was 3.68/10,000 and ranked 1st out of the 18 cancer sites reported for females. It is important to note that the mortality rate among females from lung cancer has shown a steady increase over this 5 year period.







Melanoma of Skin Males

Introduction

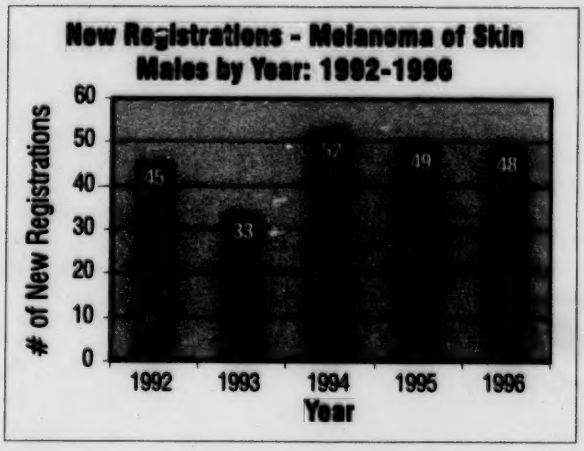
The category melanoma of skin includes the ICDO-2 topographic classification number C44. This includes virtually all area of the outer body, excluding external genitalia.

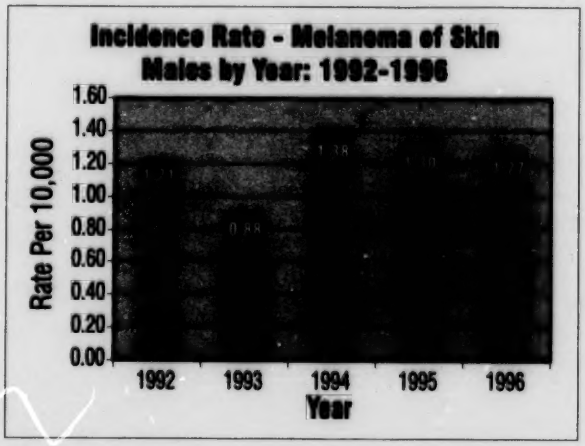
Incidence

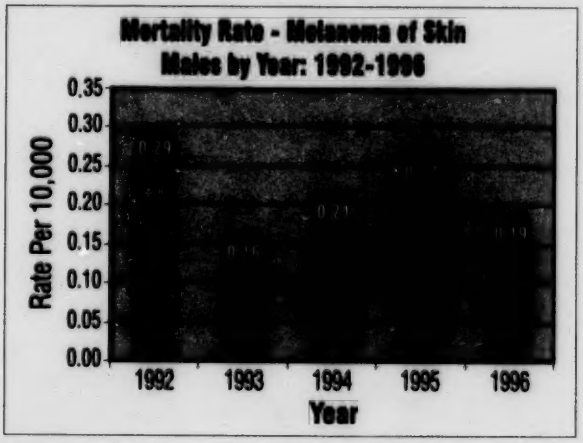
Melanoma of skin represented 2.5% of all newly registered cancers among males over the 5 year period 1992-1996. Out of the 17 cancer sites reported here for males, melanoma of skin incidence ranked 9th overall with 227 new registrations between 1992-1996. The incidence rate ranged from 0.88/10,000 to 1.38/10,000 for the same period.

Mortality

There were 42 deaths due to melanoma of skin among males registered between 1992-1996, representing 1.0% of all cancer deaths among males in this period. The mortality rate ranged from 0.16/10,000 to 0.29/10,000 during this time, with the highest rate occurring in 1992. The 5 year average mortality rate was 0.22/10,000 and ranked 14th out of the 17 cancer sites reported for males.







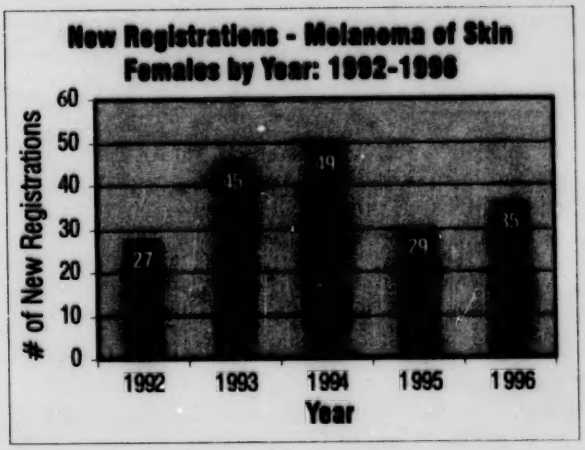
Melanoma of Skin - Females

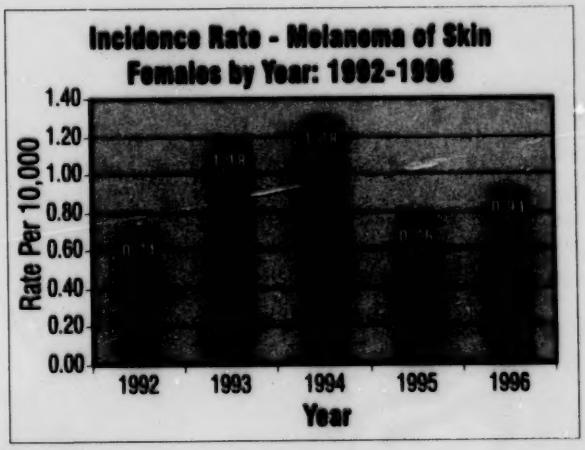
Incidence

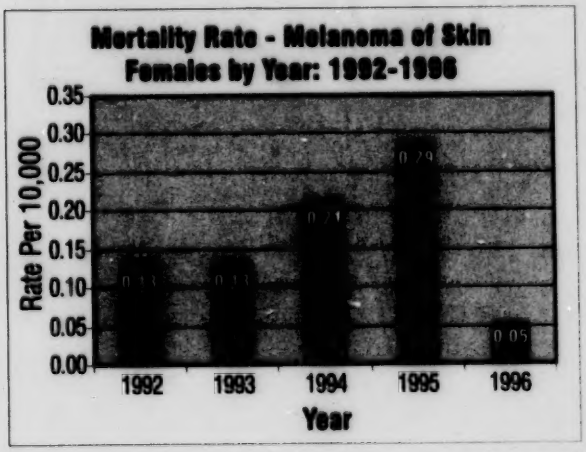
Melanoma of skin represented 2.6% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, melanoma of skin incidence ranked 9th overall, 185 new registrations between 1992-1996. Incidence rate ranged from 0.71/10,000 to 1.28/10,000 over the same period.

Mortality

There were 31deaths due to melanoma of skin among females registered between 1992-1996, representing 0.9% of all cancer deaths among females in this period. The mortality rate ranged from 0.05/10,000 to 0.29/ 10,000 during this time, with the highest rate occurring in 1994. The 5 year average mortality rate was 0.16/ 10,000 and ranked 15th out of the 18 cancer sites reported for females. Mortality due to melanoma of skin showed a steady increase from 1992 to 1995, then a marked decline in 1996.







Breast Cancer Males

Introduction

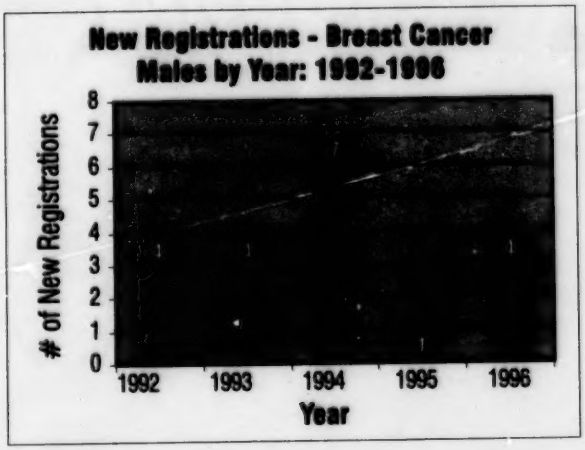
The category breast cancer includes the ICDO-2 topographic classification number C50. This includes all parts of the breast proper, overlapping lesion, and breast – not otherwise specified.

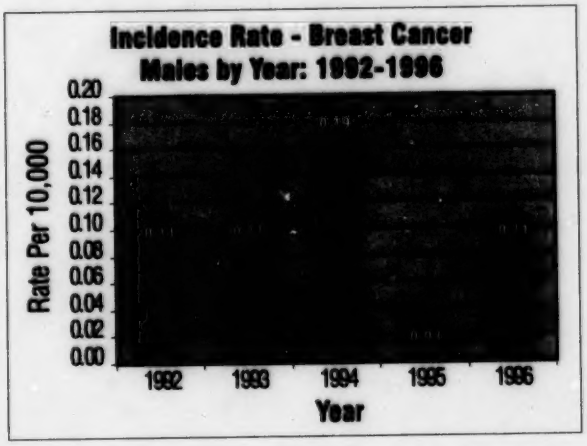
Incidence

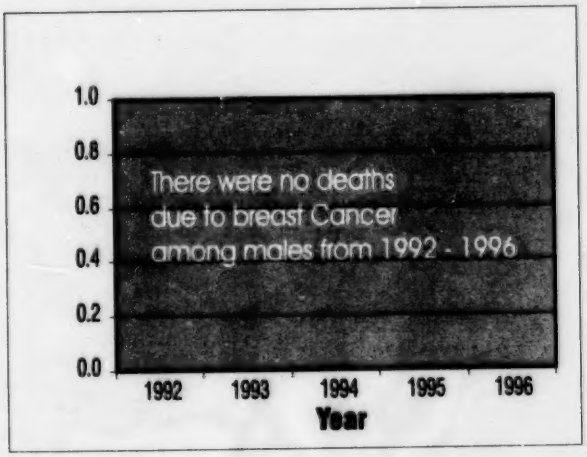
Breast cancer represented 0.2% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, breast cancer incidence ranked 17th overall with 20 new registrations between 1992-1996. The incidence rate ranged from 0.03/10,000 to 0.19/10,000 for the same period.

Mortality

There were no deaths due to breast cancer among males registered between 1992-1996. The mortality rate was 0.0/10,000 over the 5 year period. The 5 year average mortality rate was 0.0/10,000 and ranked 17th out of the 17 sites reported for males.







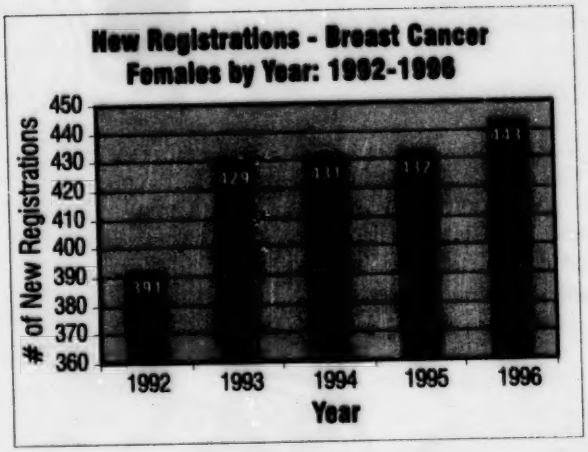
Breast Cancer Females

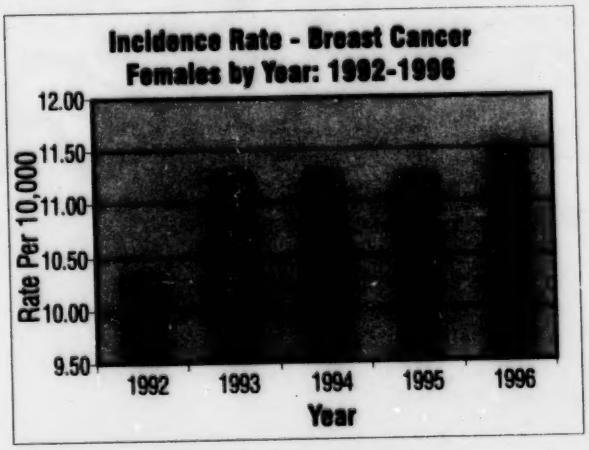
Incidence

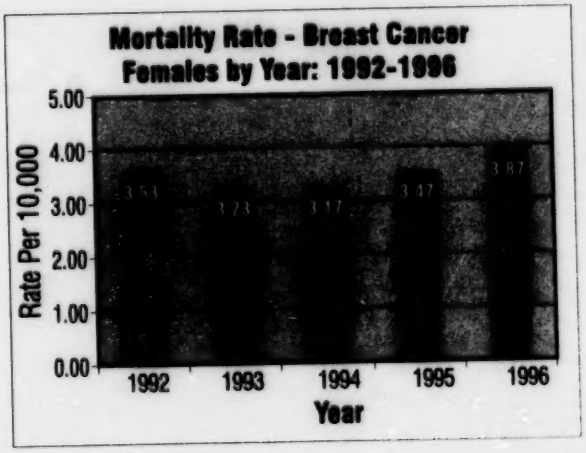
Breast cancer represented 29.6% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, breast cancer incidence ranked 1st overall, with 2,126 new registrations between 1992-1996. The incidence rate ranged from 10.30/10,000 to 11.50/10,000 for the same period.

Mortality

There were 660 deaths due to breast cancer among females registered between 1992-1996, representing 18.7% of all cancer deaths among females in this period. The mortality rate ranged from 3.17/10,000 to 3.87/10,000 during this time, with the highest rate occurring in 1996. The 5 year average mortality rate was 3.45/10,000 and ranked 2nd out of the 18 cancer sites reported for females.







Bladder Cancer Males

Introduction

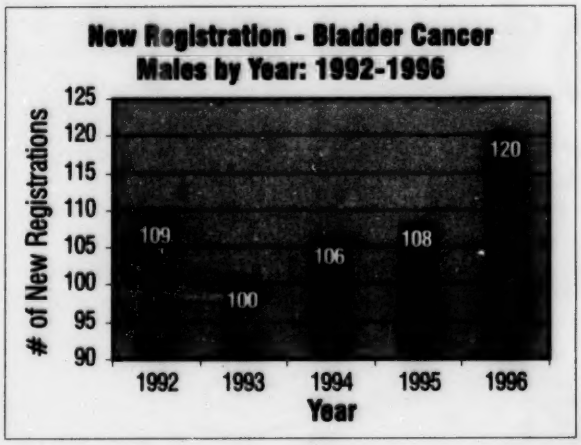
The category bladder cancer includes the ICDO-2 topographic classification number C67. This includes trigone, and dome of bladder, lateral, anterior, posterior wall of bladder, overlapping lesion of bladder and bladder – not otherwise specified.

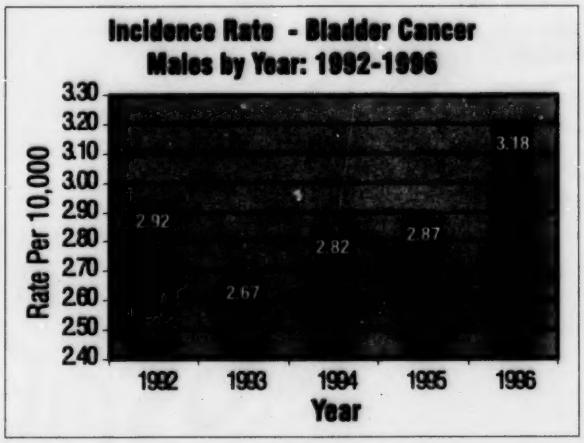
Incidence

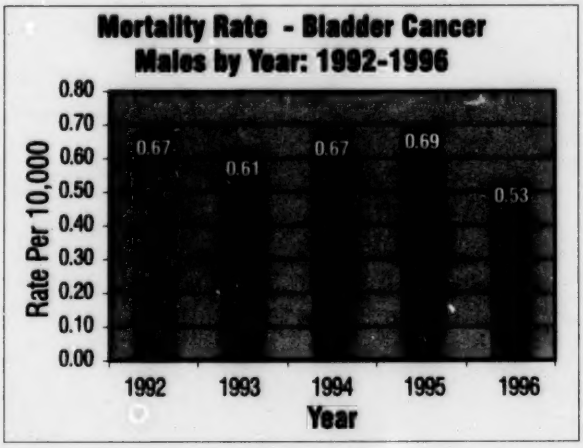
Bladder cancer represented 6.0% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, bladder cancer incidence ranked 4th overall with 543 new registrations between 1992-1996. The incidence rate ranged from 2.67/10,000 to 3.18/10,000 for the same period.

Mortality

There were 119 deaths due to bladder cancer among males registered between 1992-1996, representing 2.7% of all cancer deaths among males in this period. The mortality rate ranged from 0.53/10,000 to 0.69/ 10,000 during this time, with the highest rate occurring in 1995. The 5 year average mortality rate was 0.63/ 10,000 and ranked 8th out of the 17 cancer sites reported for males.







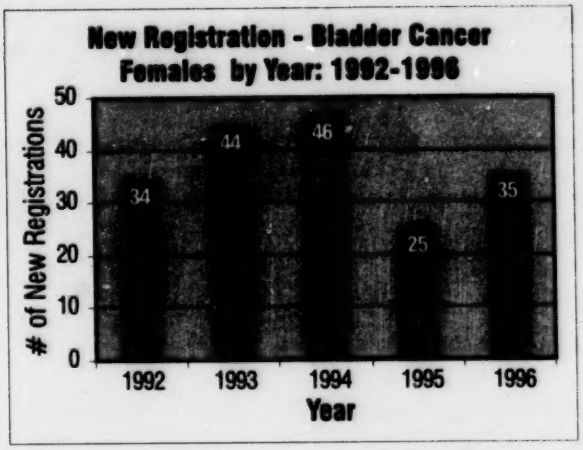
Bladder Cancer Females

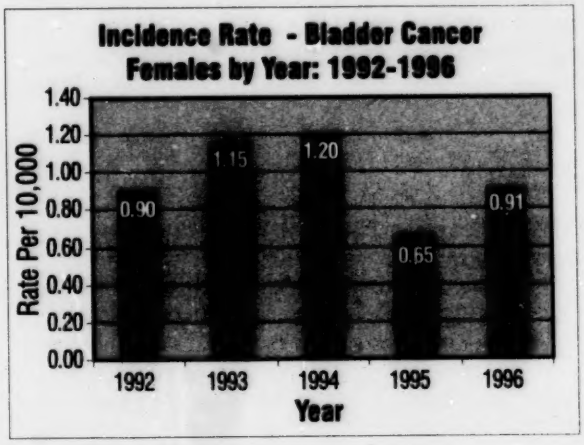
Incidence

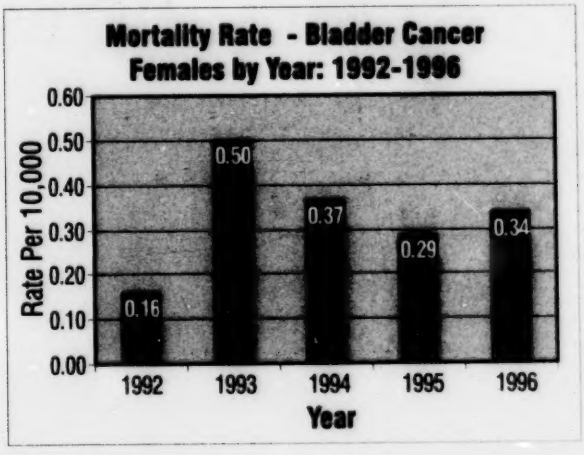
Bladder cancer represented 2.6% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, bladder cancer incidence ranked 10th overall with 184 new registrations between 1992-1996. The incidence rate ranged from 0.65/10,000 to 1.20/10,000 for the same period.

Mortality

There were 63 deaths due to bladder cancer among females registered between 1992-1996, representing 1.8% of all cancer deaths among females in this period. The mortality rate ranged from 0.16/10,000 to 0.50/10,000 during this time, with the highest rate occurring in 1993. The 5 year average mortality rate was 0.33/10,000 and ranked 12th out of the 18 cancer sites reported for females.







Kidney Cancer Males

Introduction

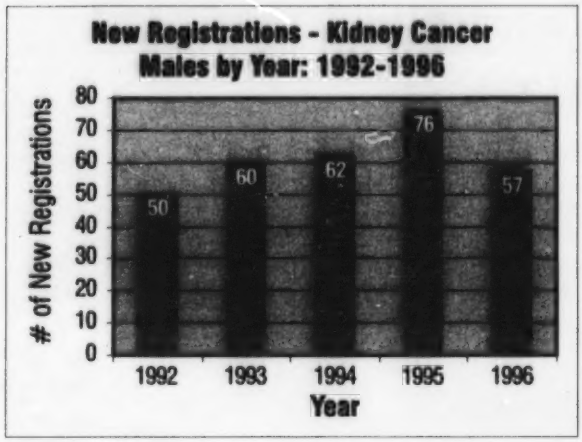
The category kidney cancer includes the ICDO-2 topographic classification numbers, C64 – C66 and C68. These include the kidney, renal pelvis, ureter, urethra, paraurethral gland, overlapping lesions of urinary organs and urinary system – not otherwise specified.

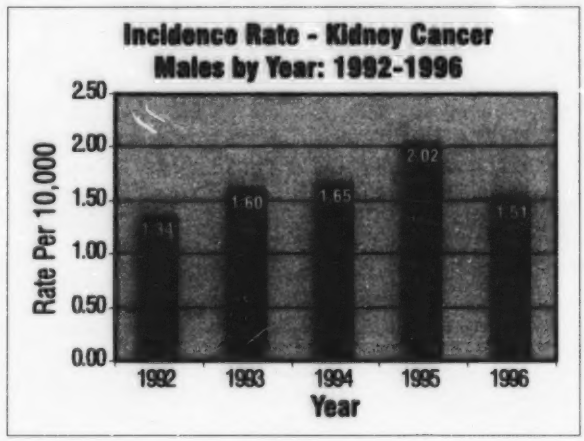
Incidence

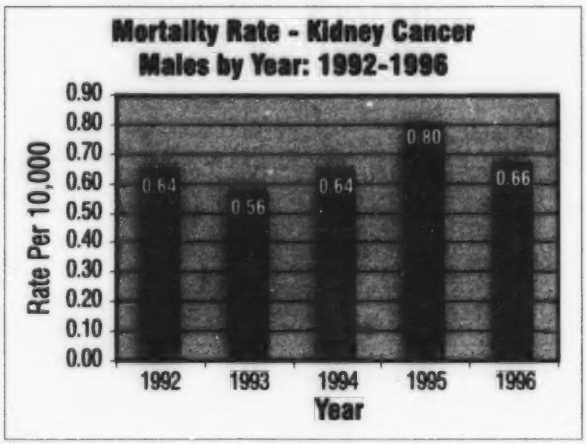
Kidney cancer represented 3.4% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, kidney cancer incidence ranked 6th overall with 305 new registrations between 1992-1996. The incidence rate ranged from 1.34/10,000 to 2.02/10,000 for the same period.

Mortality

There were 124 deaths due to kidney cancer among males registered between 1992-1996, representing 2.8% of all cancer deaths among males in this period. The mortality rate ranged from 0.56/10,000 to 0.80/10,000 during this time, with the highest rate occurring in 1995. The 5 year average mortality rate was 0.66/10,000 and ranked 7th out of the 17 cancer sites reported for males.







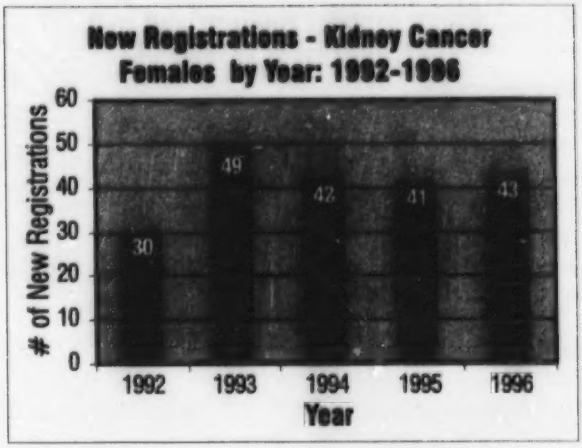
Kidney Cancer Females

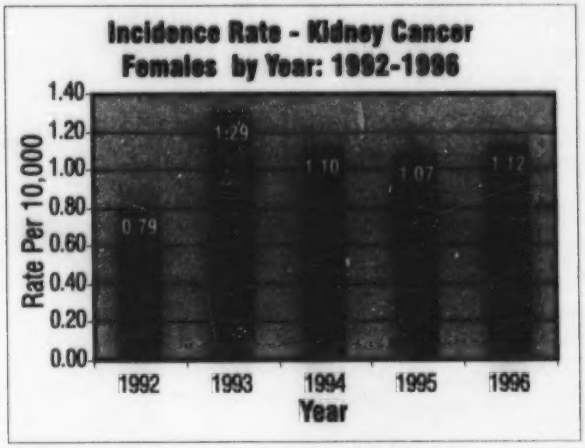
Incidence

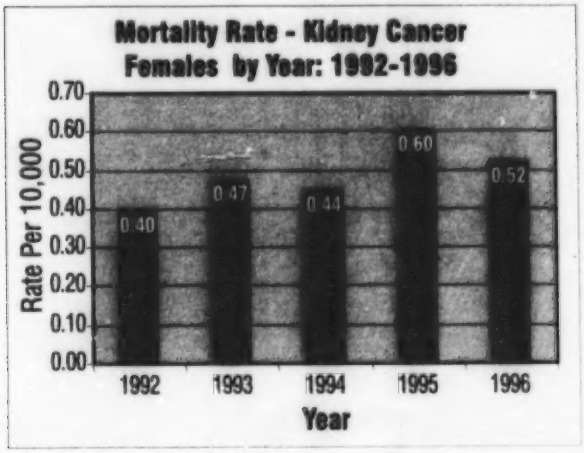
Kidney cancer represented 2.9% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, kidney cancer incidence ranked 7th overall, with 205 new registrations between 1992-1996. The incidence rate ranged from 0.79/10,000 to 1.29/10,000 for the same period.

Mortality

There were 93 deaths due to kidney cancer among females registered between 1992-1996, representing 2.6% of all cancer deaths among females in this period. The mortality ranged from 0.40/10,000 to 0.60/10,000 during this time, with the highest rate occurring in 1995. The 5 year average mortality rate was 0.49/10,000 and ranked 8th out of the 18 cancer sites reported for females.







Brain Cancer Males

Introduction

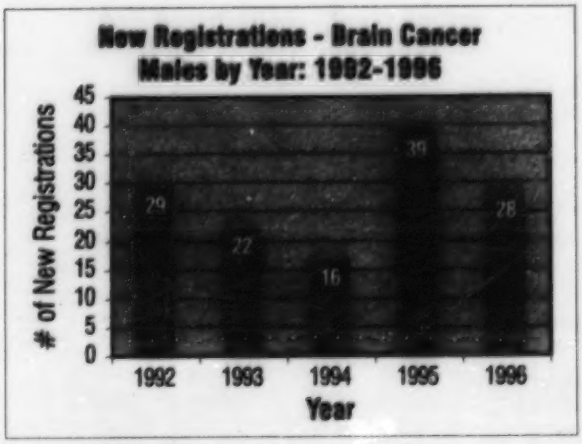
The category brain cancer includes the ICDO-2 topographic classification numbers C70-C72. These include the meninges, the brain and brain stem, the spinal cord and cranial nerves, overlapping lesions of brain and central nervous system, and nervous system – not otherwise specified.

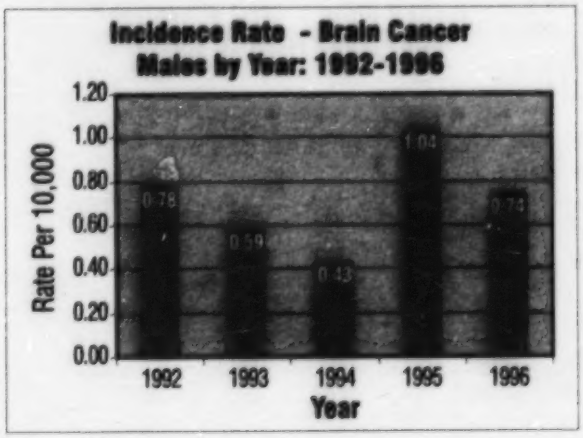
Incidence

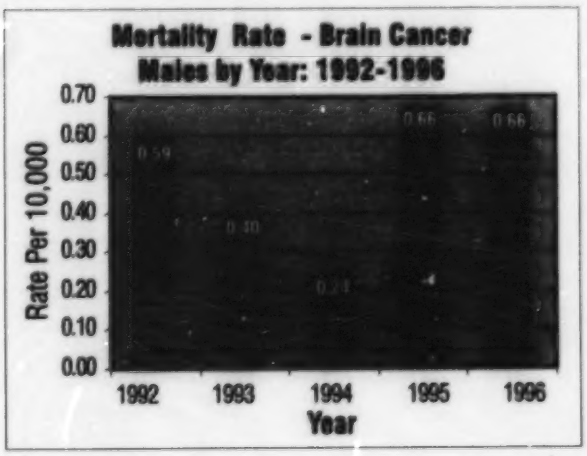
Brain cancer represented 1.5% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, brain cancer incidence ranked 13th overall with 134 new registrations between 1992-1996. The incidence rate ranged from 0.43/10,000 to 1.04/10,000 for the same period.

Mortality

There were 96 deaths due to brain cancer among males registered between 1992-1996, representing 2.2% of all cancer deaths among males in this period. The mortality rate ranged from 0.24/10,000 to 0.66/10,000 during this time, with the highest rates occurring in 1995 and 1996. The 5 year average mortality rate was 0.51/10,000 and ranked 10th out of the 17 cancer sites reported for males.







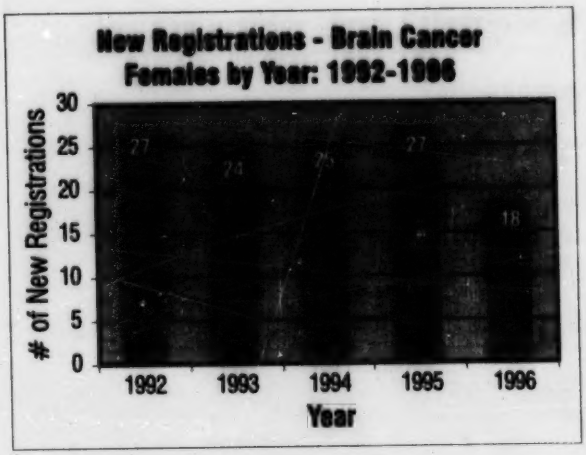
Brain Cancer Females

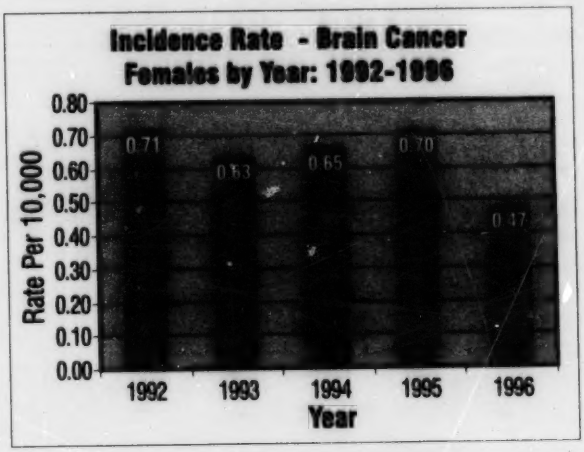
Incidence

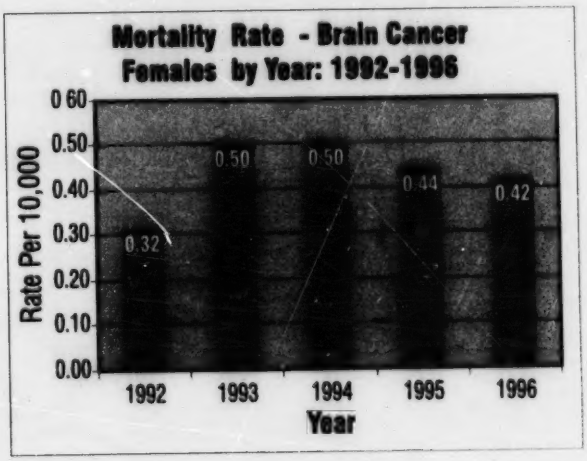
Brain cancer represented 1.70% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, brain cancer incidence ranked 14th overall, with 121 new registrations between 1992-1996. The incidence rate ranged from 0.47/10,000 to 0.71/10,000 for the same period.

Mortality

There were 83 deaths due to brain cancer among females registered between 1992-1996, representing 2.4% of all cancer deaths among females in this period. The mortality rate ranged from 0.32/10,000 to 0.50/10,000 during this time, with the highest rates occurring in 1993 and 1994. The 5 year average mortality rate was 0.43/10,000, and ranked 11th out of the 18 cancer sites reported for females.







Hodgkin's Lymphoma - Males

Introduction

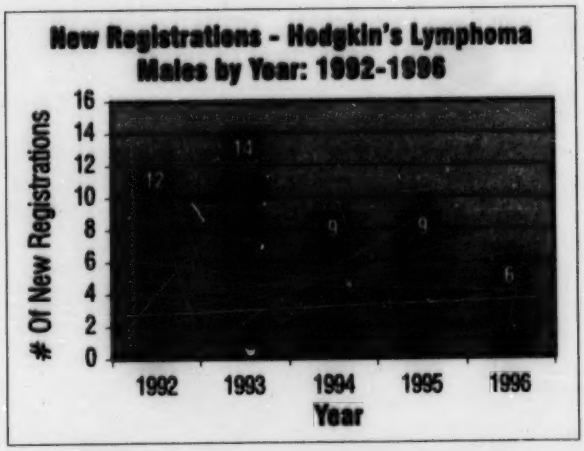
Hodgkin's lymphoma was relatively infrequent in males with 50 cases registered in 5 years. The male: female ratio = 1.2:1.0 indicating slightly fewer cases among females. The ICDO-2 morphological numbers = 965-966.

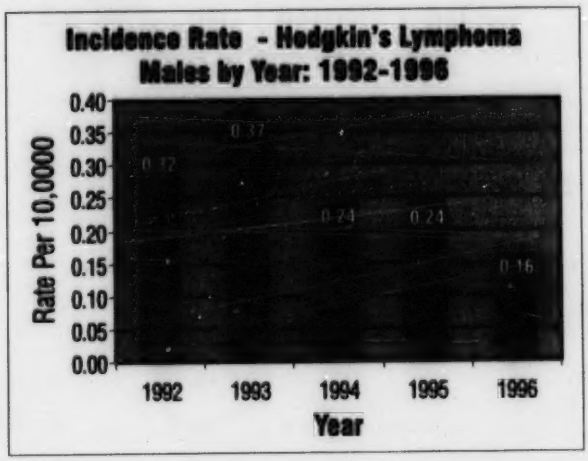
Incidence

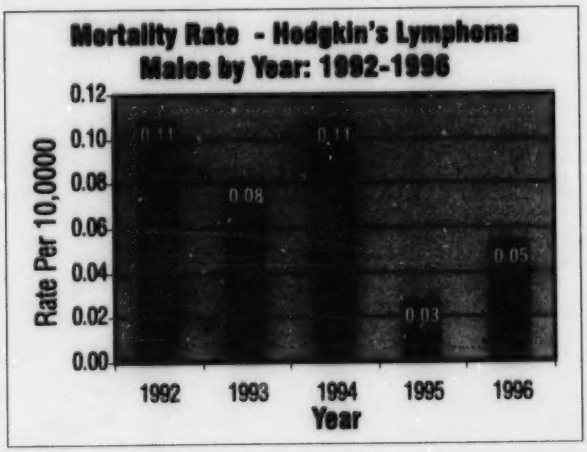
Hodgkin's lymphoma represented 0.6% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, Hodgkin's lymphoma incidence ranked 16th overall with 50 new registrations between 1992-1996. The incidence rate ranged from 0.16/10,000 to 0.37/10,000 for the same period.

Mortality

There were 14 deaths due to Hodgkin's lymphoma among males registered between 1992-1996, representing 0.3% of all cancer deaths among males in this period. The mortality rate ranged from 0.03/10,000 to 0.11/10,000 during this time, with the highest rates occurring in 1992 and 1994. The 5 year average mortality rate was 0.07/10,000 and ranked 15th out of the 17 cancer sites reported for males.







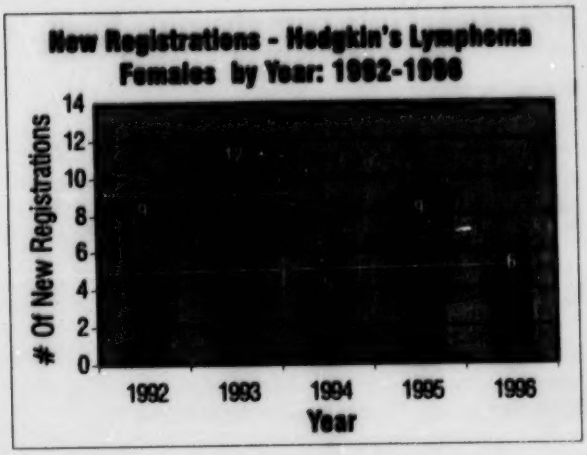
Hodgkin's Lymphoma - Females

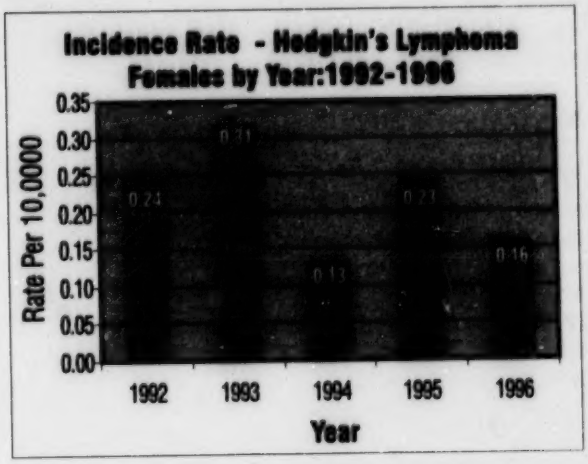
Incidence

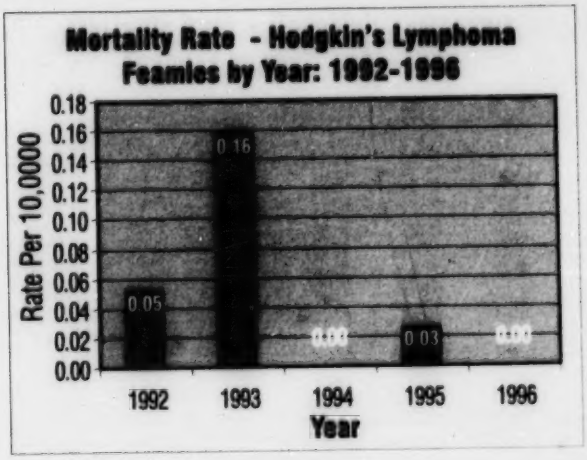
Hodgkin's lymphoma represented 0.6% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, Hodgkin's Lymphoma incidence ranked 17th overall, with 41 new registrations between 1992-1996. The incidence rate ranged from 0.13/10,000 to 0.31/ 10,000 for the same period.

Mortality

There were 9 deaths due to Hodgkin's lymphoma among females registered between 1992-1996, representing 0.3% of all cancer deaths among females in this period. The mortality rate ranged from 0.00/ 10,000 to 0.16/10,000 during this time, with the highest rate occurring in 1993. The 5 year average mortality rate was 0.05/10,000 and ranked 18th out of the 18 cancer sites reported for females.







Non-Hodgkin's Lymphoma - Males

Introduction

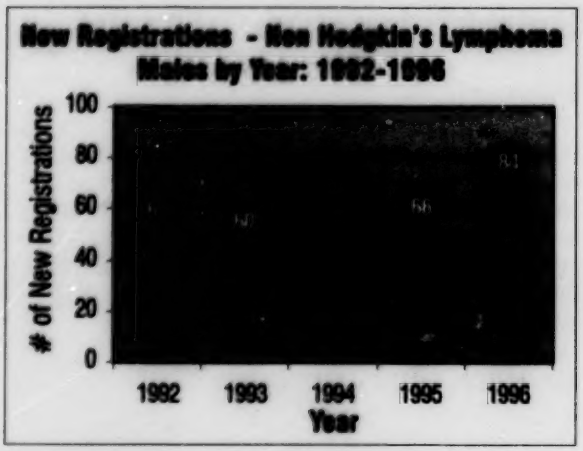
Non-Hodgkin's lymphoma showed a slightly greater incidence in males than females, but they share the same ranking. (male:female ratio =1.1:1.0)
The ICDO-2 morphological numbers = 959, 967-972.

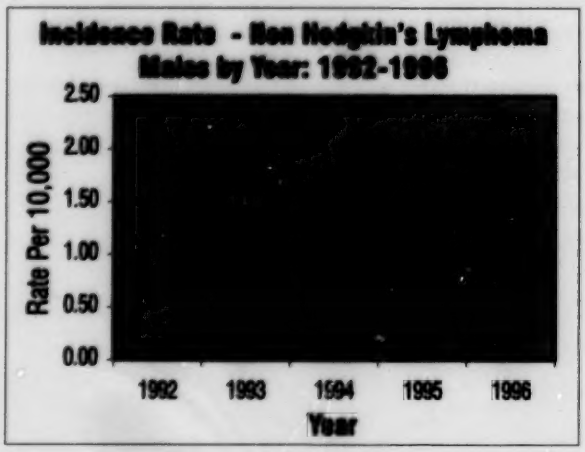
Incidence

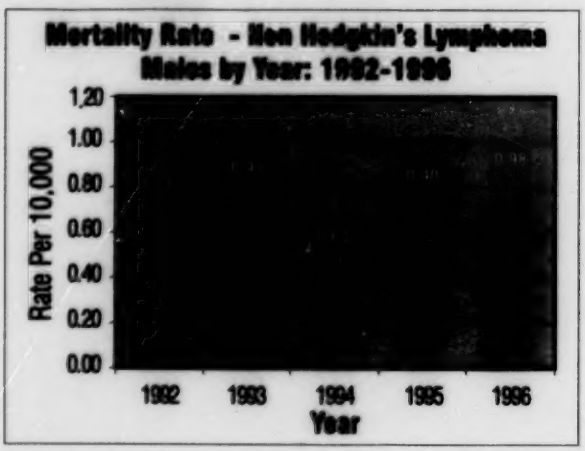
Non-Hodgkin's lymphoma represented 3.9% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, non-Hodgkins's lymphoma incidence ranked 5th overall with 347 new registrations between 1992-1996. The incidence rate ranged from 1.60/10,000 to 2.23/ 10,000 for the same period.

Mortality

There were 162 deaths due to non-Hodgkin's lymphoma among males registered between 1992-1996, representing 3.7% of all cancer deaths among males in this period. The mortality rate ranged from 0.64/10,000 to 0.98/10,000 during this time, with the highest rate occurring in 1996. The 5 year average mortality rate was 0.86/10,000 and ranked 6th out of the 17 cancer sites reported for males.







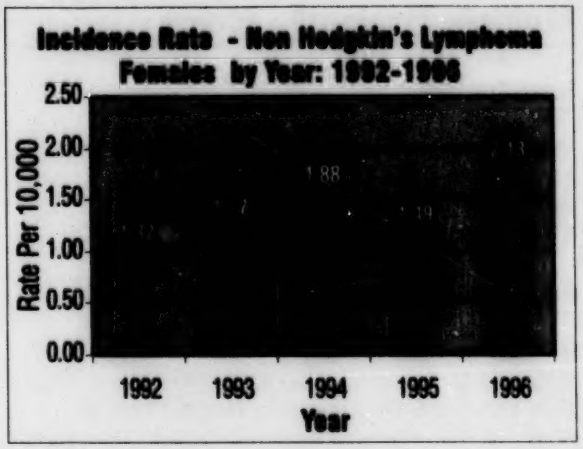
Non-Hodgkin's Lymphoma - Females

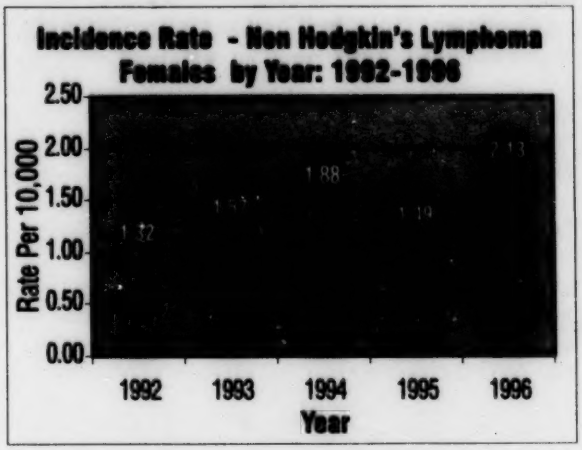
Incidence

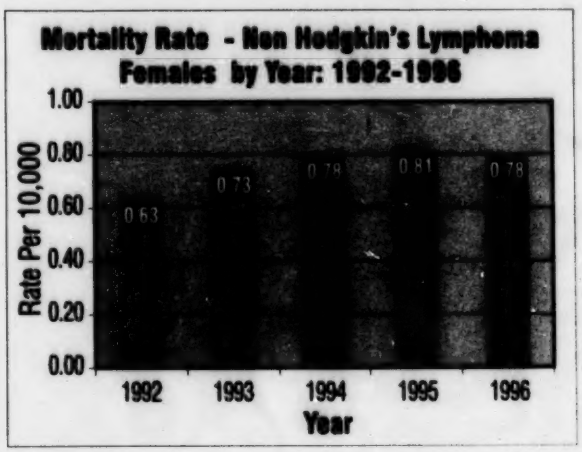
Non-Hodgkin's lymphoma represented 4.5% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, non-Hodgkin's lymphoma incidence ranked 5th overall, with 321 new registrations between 1992-1996. The incidence rate ranged from 1.32/10,000 to 2.13/ 10000 for the same period.

Mortality

There were 143 deaths due to non-Hodgkin's lymphoma among females registered between 1992-1996, representing 4.1% of all cancer deaths among females in this period. The mortality rate ranged from 0.63/ 10,000 to 0.81/10,000 during this time, with the highest rate occurring in 1995. The 5 year average mortality rate was 0.75/10,000 and ranked 6th out of the 18 cancer sites reported for females.







Multiple Myeloma - Males

Introduction

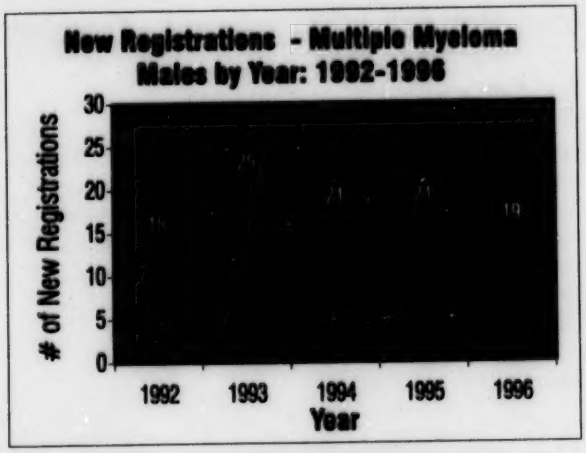
Multiple myeloma showed a greater incidence among males than females with, 24 more cases in the 5 year period 1992-1996.The male female ratio =1.3:1.0. The ICDO-2 morphological numbers = 973, 974, 976.

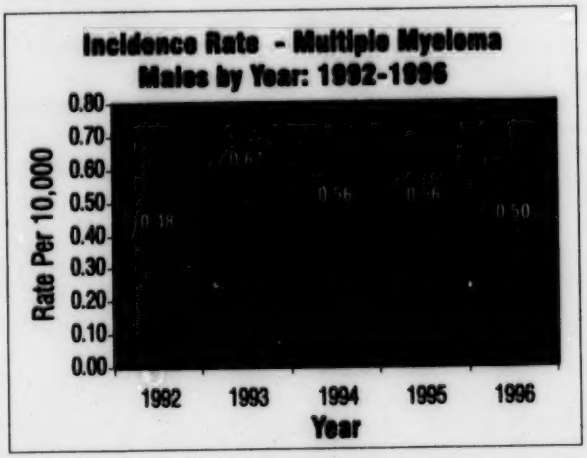
Incidence

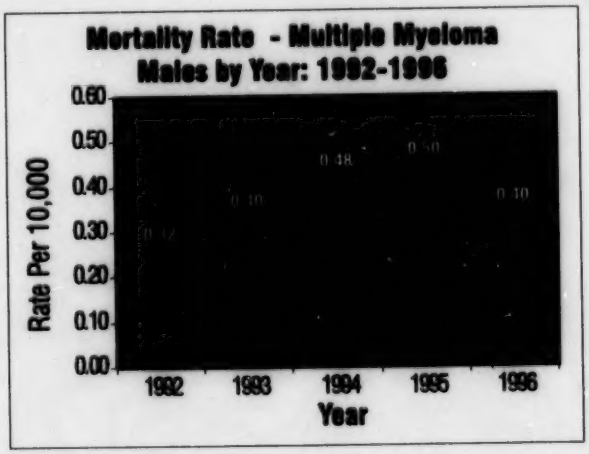
Multiple myeloma represented 1.2% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, multiple myeloma incidence ranked 14th overall with 104 new registrations between 1992-1996. The incidence rate ranged from 0.48/10,000 to 0.67/10,000 for the same period.

Mortality

There were 79 deaths due to multiple myeloma among males registered between 1992-1996, representing 1.8% of all cancer deaths among males in this period. The mortality rate ranged from 0.32/10,000 to 0.50/10,000 during this time, with the highest rate occurring in 1995. The 5 year average mortality rate was 0.42/10,000 and ranked 11th out of the 17 cancer sites reported for males.







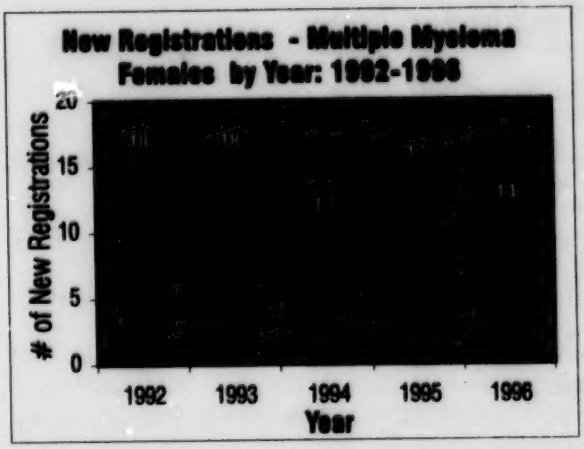
Multiple Myeloma - Females

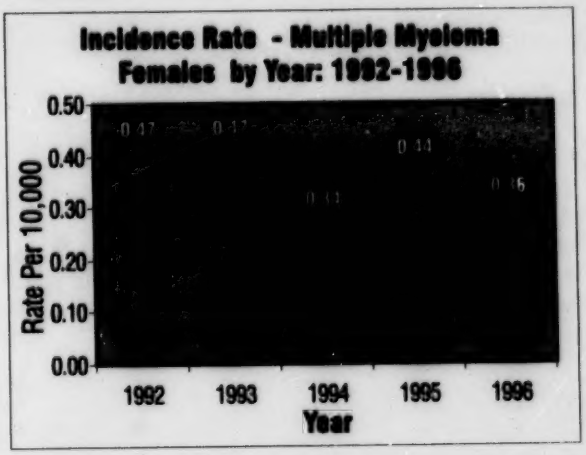
Incidence

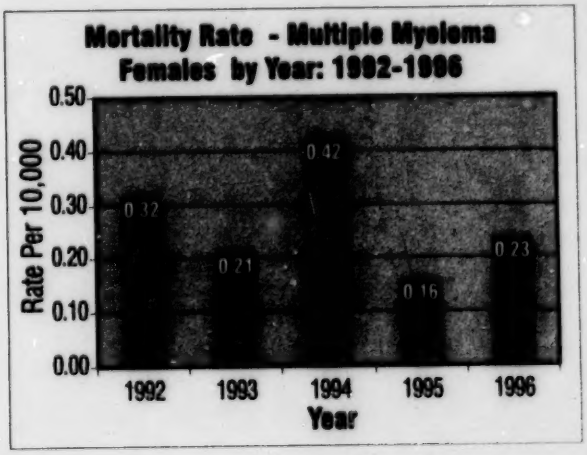
Multiple myeloma represented 1.1% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, multiple myeloma incidence ranked 16th overall, with 80 new registrations between 1992-1996. The incidence rate ranged from 0.34/10,000 to 0.47/10,000 for the same period.

Mortality

There were 51 deaths due to multiple myeloma among females registered between 1992-1996, representing 1.4% of all cancer deaths among females in this period. The mortality rate ranged from 0.16/10,000 to 0.42/10,000 during this time, with the highest rate occurring in 1994. The 5 year average mortality rate was 0.27/10,000 and ranked 13th out of the 18 cancer sites reported for females.







Leukemia - Males

Introduction

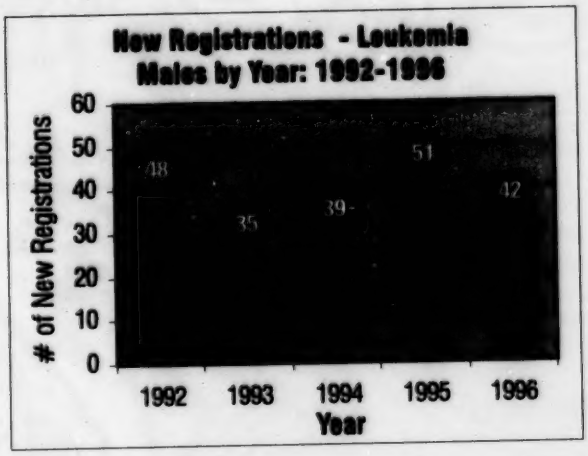
Leukemia occurred somewhat more often in males (215 cases) than females (157 cases) between 1992-1996: male:female ratio = 1.4:1.0. The ICDO-2 morphological numbers = 980-994.

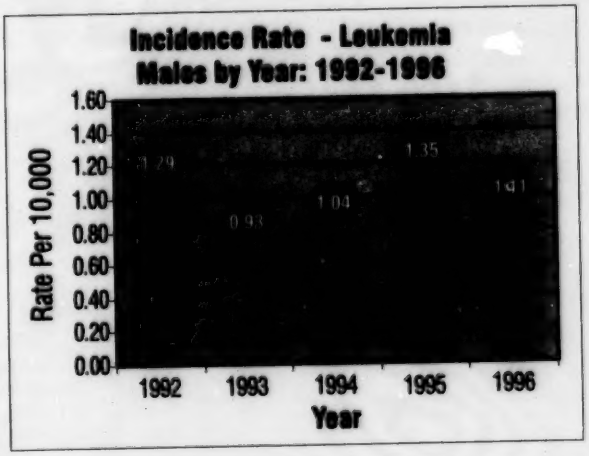
Incidence

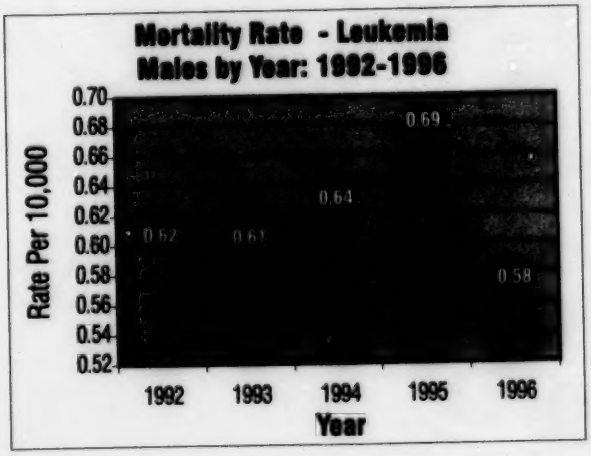
Leukemia represented 2.4% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, leukemia incidence ranked 10th overall with 215 new registrations between1992-1996. The incidence rate ranged from 0.93/10,000 to 1.35/10,000 for the same period.

Mortality

There were 118 deaths due to leukemia among males registered between 1992-1996, representing 2.7% of all cancer deaths among males in this period. The mortality rate ranged from 0.58/10,000 to 0.69/10,000 during this time with the highest rate occurring in 1995. The 5 year average mortality rate was 0.63/10,000 and ranked 9th out of the 17 cancer sites reported for males.







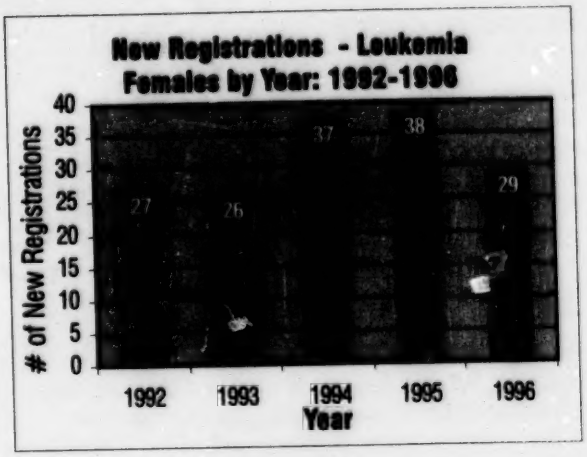
Leukemia Females

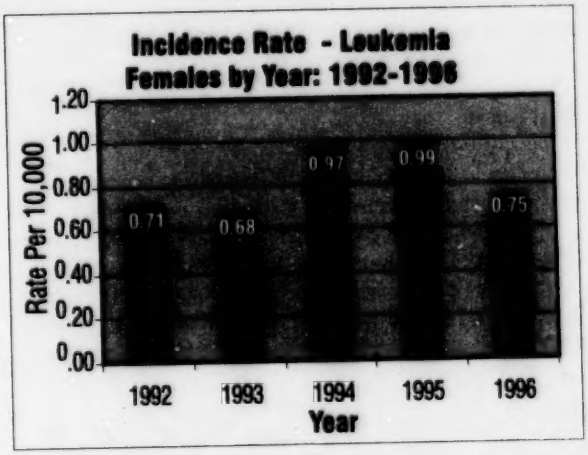
Incidence

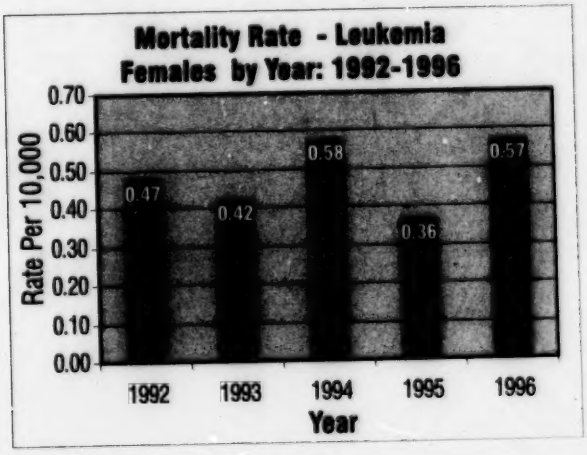
Leukemia represented 2.2 % of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, leukemia incidence ranked 12th overall, with 157 new registrations between 1992-1996. The incidence rate ranged from 0.68/10,000 to 0.99/10,000 for the same period.

Mortality

There were 92 deaths due to leukemia among females registered between 1992-1996, representing 2.6% of all cancer deaths among females in this period. The mortality ranged from 0.36/10,000 to 0.58/10,000 during this time with the highest rate occurring in 1994. The 5 year average mortality rate was 0.48/10,000 and ranked 9th out of the 18 cancer sites reported for females.







Prostate Cancer

Introduction

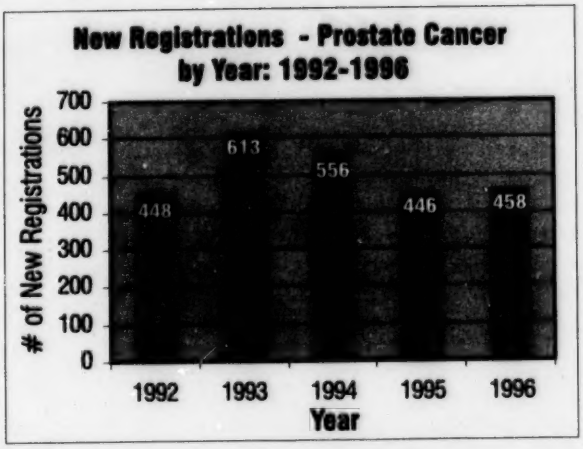
The category prostate cancer includes the ICDO-2 topographic classification number C61. This includes the prostate gland and prostate – not otherwise specified.

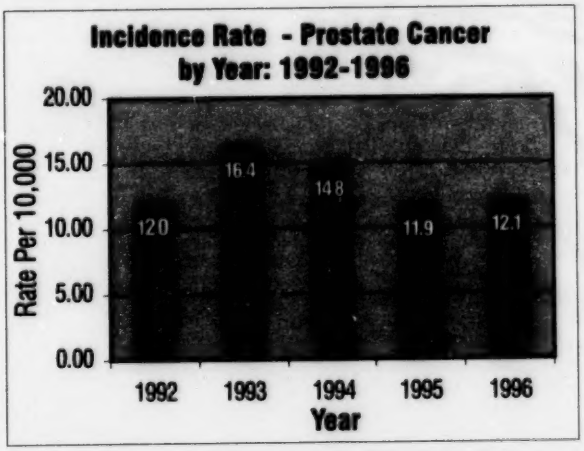
Incidence

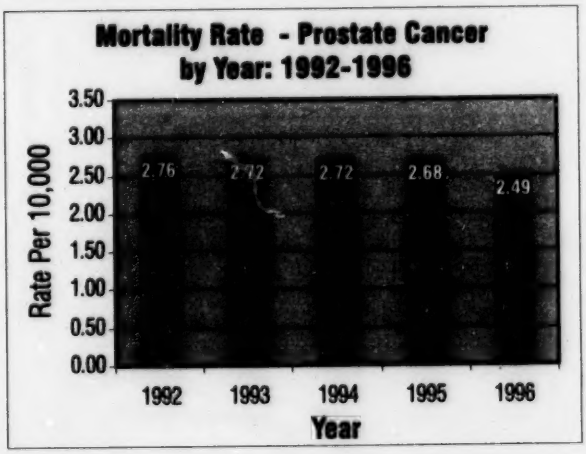
Prostate cancer represented 28.0% of all newly registered cancers among males over the period 1992-1996. Out of the 17 cancer sites reported here for males, prostate cancer incidence ranked 1st overall with 2521 new registrations between 1992-1996. The incidence rate ranged from 11.85/10,000 to 16.37/10,000 for the same period.

Mortality

There were 502 deaths due to prostate cancer among males registered between 1992-1996, representing 11.5% of all cancer deaths among males in this period. The mortality rate ranged from 2.49/10,000 to 2.76/10,000 during this time, with the highest rate occurring in 1992. The 5 year average mortality rate was 2.67/10,000 and ranked 2nd out of the 17 cancer sites reported for males.







Testis Cancer

Introduction

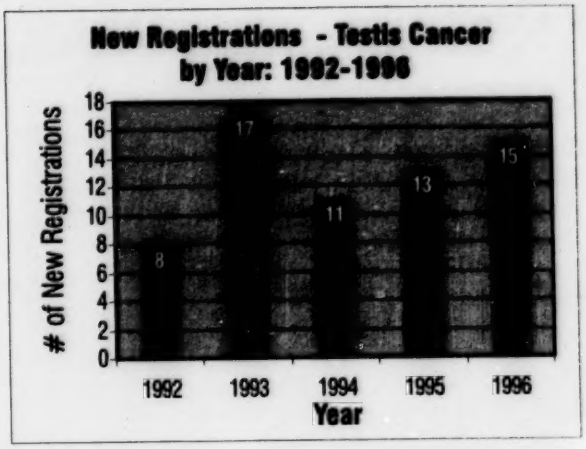
The category testis cancer includes the ICDO-2 topographic classification number C62. This includes undescended testis, descended testis, and testis – not otherwise specified.

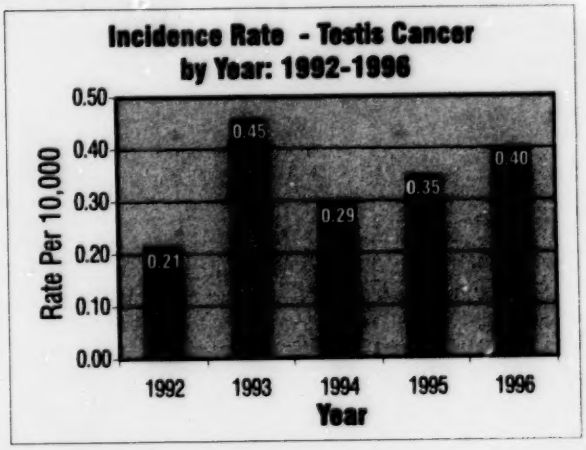
Incidence

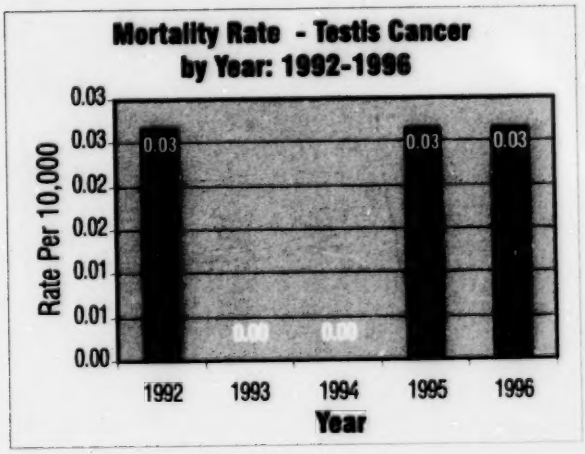
Testis cancer represented 0.7% of all newly registered cancers among males over the 1992-1996. Out of the 17 cancer sites reported here for males, testis cancer incidence ranked 15th overall with 64 new registrations between 1992-1996. The incidence rate ranged from 0.21/10,000 to 0.45/10,000 for the same period.

Mortality

There were 3 deaths due to testis cancer among males registered between 1992-1996, representing 0.1% of all cancer deaths among males in this period. The mortality rate ranged from 0.00/10,000 to 0.03/10,000 during this time, with the highest rates occurring in 1992, 1995, and 1996 – one death in each year. The 5 year average mortality rate was 0.02/10,000 and ranked 16th out of the 17 cancer sites reported for males.







Cervix Cancer

Introduction

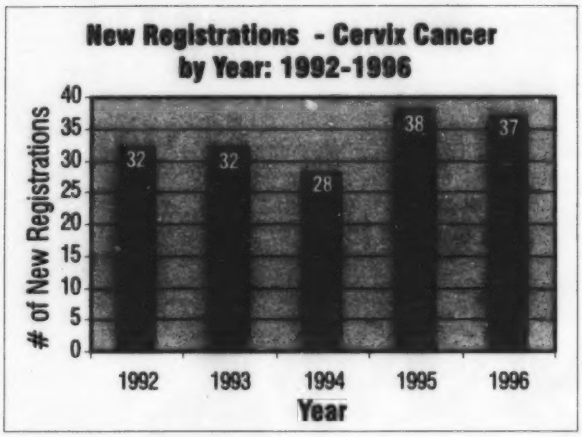
The category cervix cancer includes the ICDO-2 topographic classification number C53. This includes: endocervix, exocervix, overlapping lesions of cervix uteri, and cervix uteri – not otherwise specified.

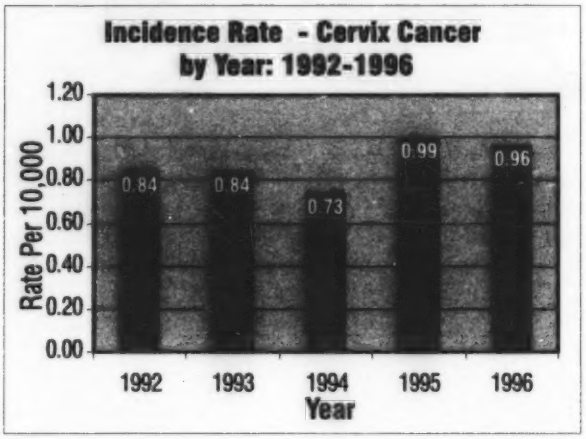
Incidence

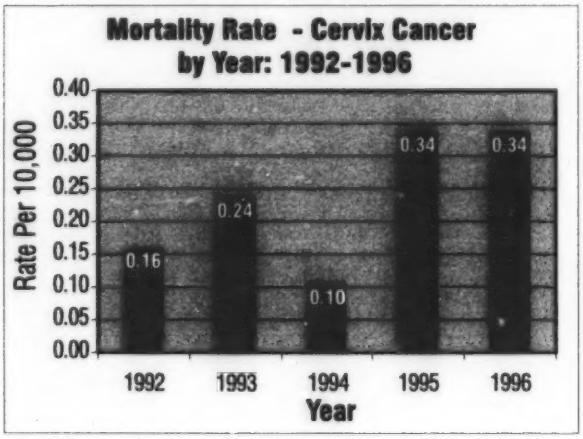
Cervical cancer represented 2.3% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, cervical cancer incidence ranked 11th overall with 167 new registrations between 1992-1996. The incidence rate ranged from 0.73/10,000 to 0.99/10,000 for the same period.

Mortality

There were 45 deaths due to cervical cancer among females registered between 1992-1996, representing 1.3% of all cancer deaths among females in this period. The mortality rate ranged from 0.10/10,000 to 0.34/10,000 during this time, with the highest rates occurring in 1995 and 1996. The 5 year average mortality rate was 0.24/10,000 and ranked 14th out of the 18 cancer sites reported for females.







Body of Uterus Cancer

Introduction

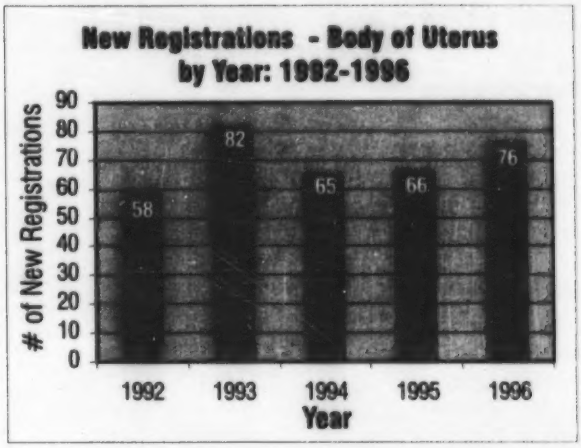
The category uterus cancer includes the ICDO-2 topographic classification numbers C54 – C55. These include: isthumus uteri, endometrium, myometrium, fundus, overlapping lesions of corpus uteri, corpus uteri, and uterus – not otherwise specified.

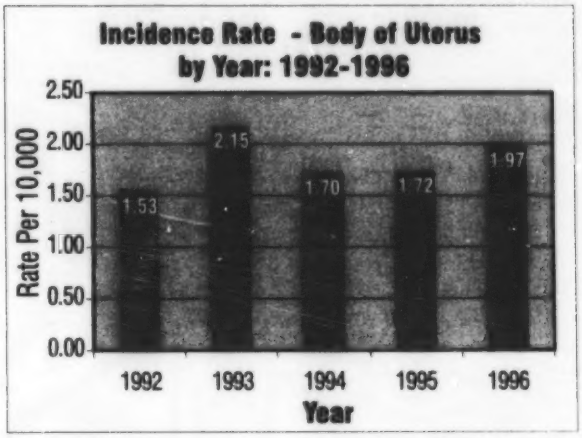
Incidence

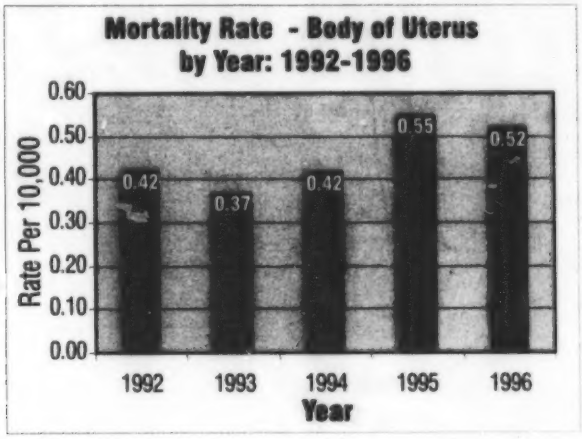
Cancer of the uterus represented 4.8% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, uterine cancer incidence ranked 4th overall with 347 new registrations between 1992-1996. The incidence rate ranged from 1.53/10,000 to 2.15/10,000 for the same period.

Mortality

There were 87 deaths due to cancer of the uterus among females registered between 1992-1996, representing 2.5% of all cancer deaths among females in this period. The mortality rate ranged from 0.37/10,000 to 0.55/10,000 during this time, with the highest rate occurring in 1995. The 5 year average mortality rate was 0.46/10,000 and ranked 10th out of the 18 cancer sites reported for females.







Ovary Cancer

Introduction

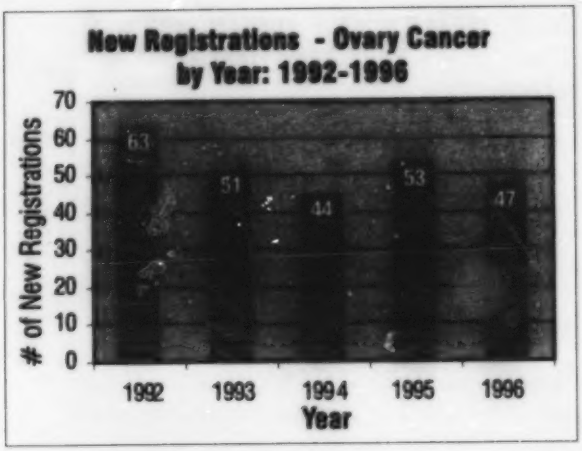
The category ovary cancer includes the ICDO-2 topographic classification number C56-C57.4. These include the ovary, fallopian tube, broad ligament, round ligament, parametrium, and uterine adnexa.

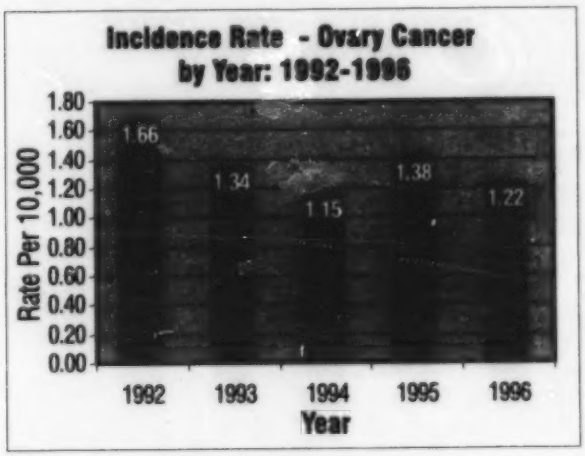
Incidence

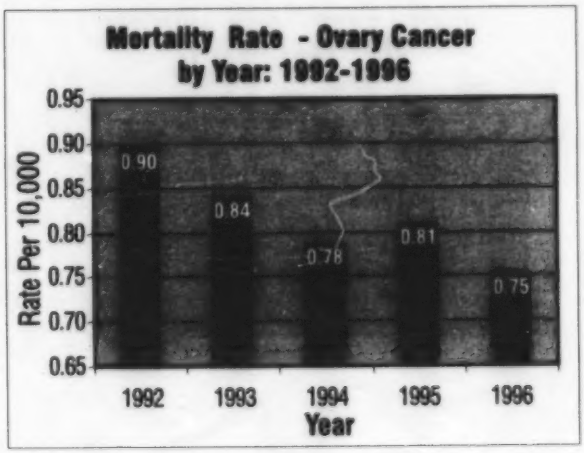
Ovarian cancer represented 3.6% of all newly registered cancers among females over the period 1992-1996. Out of the 18 cancer sites reported here for females, ovarian cancer incidence ranked 6th overall, with 258 new registrations between 1992-1996. The incidence rate ranged from 1.15/10,000 to 1.66/10,000 for the same period.

Mortality

There were 156 deaths due to ovarian cancer among females registered between 1992-1996, representing 4.4 % of all cancer deaths among females in this period. The mortality rate ranged from 0.75/10,000 to 0.90/ 10,000 during this time, with the highest rate occurring in 1992. The 5 year average mortality rate was 0.82/ 10,000 and ranked 5th out of the 18 cancer sites reported for females.







All Other Cancers Males

Introduction

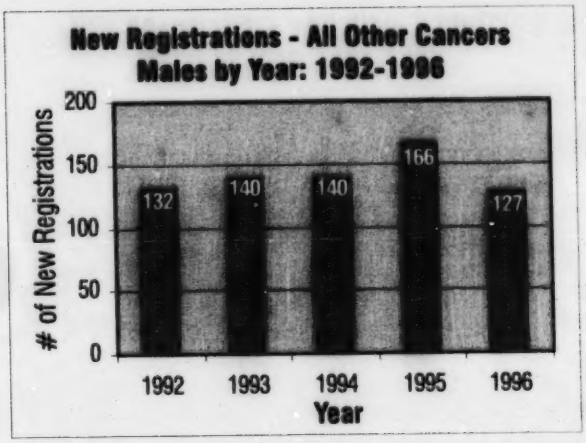
The category "All Other" includes tumours registered from all sites other than the 17 male sites identified above.

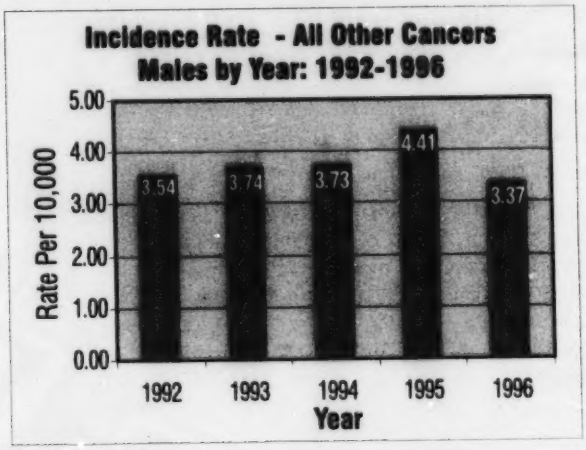
Incidence

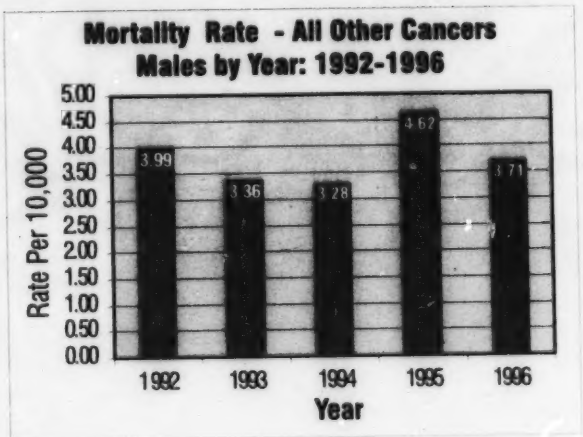
The category "All Other" cancer sites represented 7.8% of all newly registered cancers among males over the period 1992-1996. The category "All Other" sites showed 705 new registrations for males between 1992-1996. If ranked as a category, "All Other" sites would place 4th between colorectal and bladder in terms of incidence. The incidence rate ranged from 3.37/10,000 to 4.41/10,000 for the period 1992-1996.

Mortality

There were 712 deaths due to cancer in all other sites among males registered between 1992-1996, representing 16.3% of all cancer deaths among males in this period. The mortality rate ranged from 3.28/10,000 to 4.62/10,000 during this time, with the highest rate occurring in 1995. The 5 year average mortality rate was 3.79/10,000 and if ranked would place 2nd between lung and prostate.







All Other Cancers - Females

Introduction

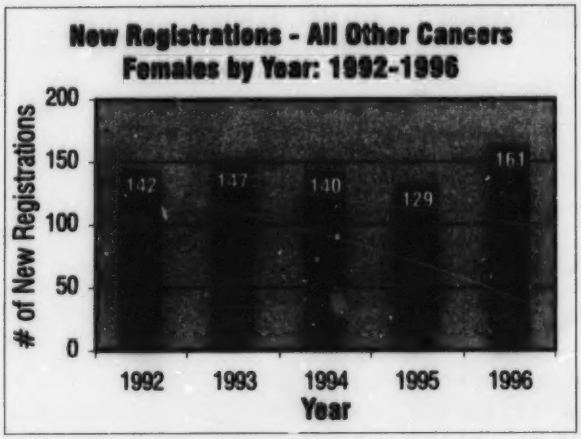
The category "All Other" includes tumours registered from all sites other than the 18 female sites identified above.

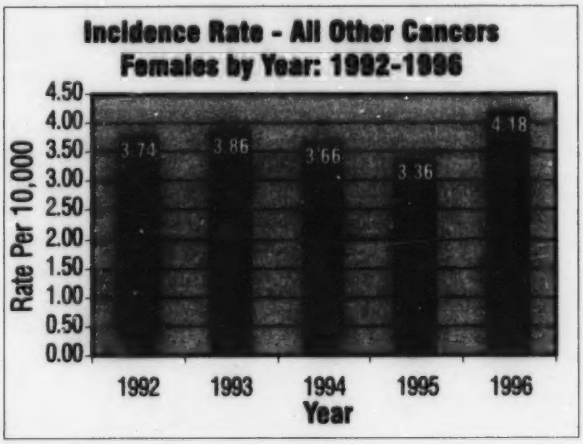
Incidence

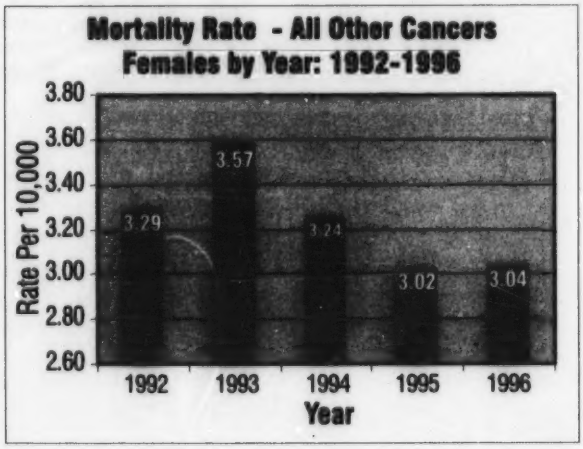
Cancer in all other sites represented 10.0% of all newly registered cancers among females over the period 1992-1996. The category "All Other" sites showed 719 new registrations between 1992-1996. If ranked as a category, "All Other" sites would place 4th between lung and body of uterus in terms of incidence. The incidence rate for "All Other" sites ranged from 3.36/10,000 to 4.18/10,000 for the period 1992-1996.

Mortality

There were 618 deaths due to cancer in all other sites among females registered between 1992-1996, representing 17.5% of all cancer deaths among females in this period. The mortality rate ranged from 3.02/10,000 to 3.57/10,000 during this time, with the highest rate occurring in 1993. The 5 year average mortality rate was 3.23/10,000 and if ranked would place 3rd between breast and colorectal.







Total Males (Excluding Non-Melanoma)

Introduction

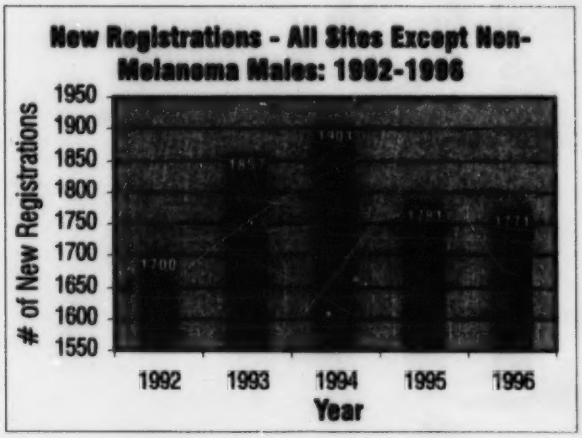
The category "Total Males" includes all individual sites mentioned above plus the "All Others" category, and excludes non-melanoma.

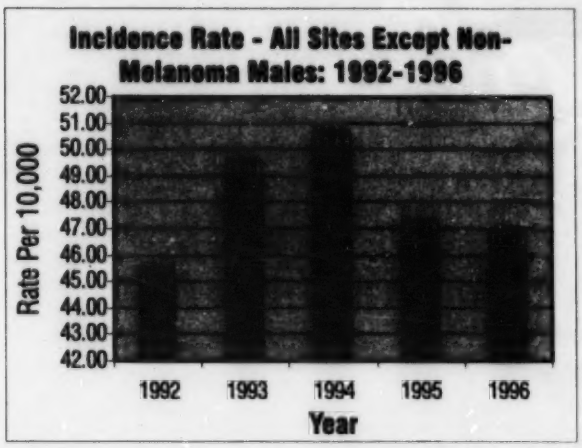
Incidence

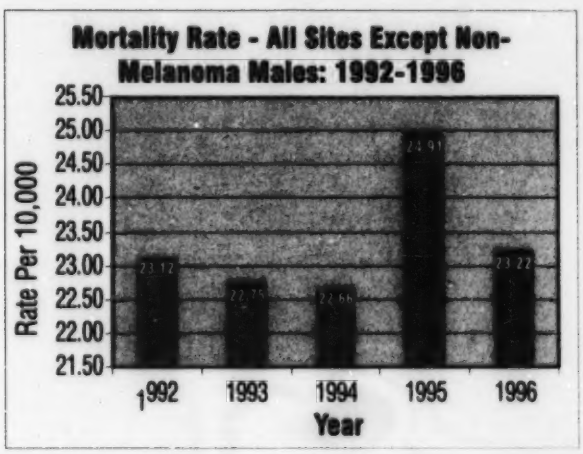
There were 9,012 new registrations for cancer from all sites (excluding non-melanoma) for males over the period 1992-1996. Overall the incidence rate for cancer among males ranged from 45.54/10,000 to 50.68/ 10,000 for the period 1992-1996.

Mortality

In total, there were 4,380 deaths due to cancer from all sites among males registered between 1992-1996. The total male:female ratio of deaths over this period = 1.24:1 The total mortality rate due to cancer among males has ranged from 22.66/10,000 to 24.91/10,000 during this time, with the highest rate occurring in 1995. The 5 year average mortality rate was 23.33/10,000.







Total - Females (Excluding Non-Melanoma)

Introduction

The category "Total Females" includes all individual sites mentioned above plus the "All Others" category, and excludes non-melanoma.

Incidence

There were 7,182 new registrations for cancer from all sites (excluding non-melanoma) for females over the period 1992-1996. Overall the incidence rate for cancer among females ranged from 35.82/10,000 to 38.89/ 10,000 for the period 1992-1996.

Mortality

In total, there were 3,527 deaths due to cancer from all sites among females registered between 1992-1996. The total mortality rate due to cancer among females has ranged from 17.73/10,000 to 18.82/10,000 during this time with the highest rate occurring in 1993. The 5 year average mortality rate was 18.46/10,000.